After School Program 2020-2021- Virtual Programming

To be enrolled, complete this registration and email to asas.admin@cityoforlando.net

Year: 2020-2021 Enrollment Semester:

Please answer all questions and acknowledge our Emergency Treatment Authorization, Hold Harmless Agreement and Participant Guidelines. Once your student's enrollment has been approved by staff, you will receive an email acknowledging enrollment. NOTE: A valid email address is required to use this portal. To be enrolled

OCPS Student Number:

School your student will be attending:			Grade Level:		le Level:
Student's First Name:		Middle Initial:		Last Name:	
Home Address:					
City:	State:	Zip:			
Student Date of Birth:	/ /	(Gender:	Female	Male
Ethnicity:		Primary L	anguage:		
English Language Proficien Free or Reduced Lunch:	cy:		S	ingle Parent l	Household:
Is your student eligible for t	he McKinney Vent	to Program (MVP)?	Yes	No	
Movie Viewing Permission:					
Photograph or Videotape Pe	ermission:				
Special Needs: Yes	No (If Yes, exp	lain			
Parent 1: Relationship to Stu	udent:				
Parent 1 First Name:		Last Na	ime:		

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Parent I Primary Email Address:				
Parent 1 Primary Phone Number:	Secondary Phone Number			
Emergency Contact Name and Phone Number:				
Transportation:				
Authorized Pick 1 (Name, Phone and Relationship):				
Authorized Pick 2 (Name, Phone and Relationship):				
Authorized Pick 3 (Name, Phone and Relationship):				
Authorized Pick 4 (Name, Phone and Relationship):				
Authorized Pick 5 (Name, Phone and Relationship):				
Authorized Pick 6 (Name, Phone and Relationship):				
Are you interested in participating in My Brother's Ko	eeper (MBK) Male Mentoring Program?	Yes	No	
EMERGENCY MEDICAL TREATMENT AUTH	ORIZATION ** Read Carefully Before	Signing B	elow. **	
I understand that every effort will be made to contact After School All-Star staff to arrange for emergency of		ticipant, b	ut authorize Or	lando
Sign/Initial:	(Parent/Legal Guardian Signature)			
Physician Information (Provide name, phone and ac	ddress:			

HOLD HARMLESS AGREEMENT-READ CAREFULLY BEFORE SIGNING

In consideration of the acceptance of my child or ward to participate in the activities sponsored by the City of Orlando, Families, Parks & Recreation Department, I agree on behalf of myself and my child or ward, to assume the risks incidental to such participation (which risks include, but are not limited to: physical and/or emotional injury or death) and, on my own behalf, and on behalf of my child or ward, and on behalf of any other parents or guardians of my child, and my child's or ward's heirs, executors and administrators, I agree to release and forever discharge the released parties listed below, of and from all liabilities, claims, actions, damages, costs or expenses of any nature arising out of or in any way connected with the participation of my child or ward in such activities, including, but specifically not limited to, the transportation of my child or ward to said activities, and further agree to indemnify and hold each of the released parties harmless against any and all such

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liabilities, claims, actions, damages, costs or expenses, including, but not limited to, attorney's fees and attorney's fees on appeal. The released parties are the City Of Orlando, Orlando After-School All-Stars, Inc. ("Orlando ASAS"), Orange County Public Schools, and their elected officials, board members, employees, volunteers, agents, representatives, successors and assigns of the released parties. I understand that this release and indemnity agreement includes any claims based on the negligence, action or inaction of any of the above released parties and covers bodily injury (including death), emotional injury and property loss or damage, whether suffered by me or my child or ward, before, during or after such participation. I declare that my child is physically fit and has the skill level required to participate in these activities. I further authorize medical treatment and related transportation for said child or ward, at my cost, if the need arises. Furthermore, I hereby grant full permission to the City to transport my child/ward for requested field trips, NOTE: If there are questions regarding a child's ability to participate in our program, Orlando ASAS may require an individualized assessment to be completed by the City of Orlando Families, Parks and Recreation Department or its designee. The City of Orlando / Orlando ASAS occasionally shows movies during program hours. Those children not permitted to watch movies will participate in separate activities. All movies will be chosen with careful consideration. oI hereby give my permission for my child to watch PG or PG-13 rated movies. oI hereby do not give my permission for my child to watch PG or PG-13 rated movies. I further irrevocably grant the released parties the right to photograph and/or videotape and/or record me and my child or ward and further to use said name, face, likeness, voice and appearance in connection with exhibitions, publicity, advertising and promotional materials by the City of Orlando / Orlando ASAS without reservation or limitation. I hereby release the City of Orlando and its legal representatives for all claims and liability relating to said images, video, or other media. Furthermore, I grant permission to use my or my ward's statements for the purpose of advertising and publicity without restriction. I waive my or my ward's right to any compensation. After-School All-Stars collects data of your child's school records through an agreement with Orange County Public School to evaluate if a child participating in After-School All-Stars helps students do better as well as monitoring for process improvement. This is completed while keeping your information confidential and protected. I hereby agree to release and hold harmless the above listed parties for the release of such information. This Agreement shall be governed by the laws of the State of Florida, and any legal action relating to or arising out of this Agreement shall be commenced exclusively in the Circuit Court of the Ninth Judicial Circuit in and for Orange County, Florida (or if such Circuit Court shall not have jurisdiction over the subject matter thereof, then to such other court sitting in said county and having subject matter jurisdiction). I certify that I am 18 years of age or older and that I am entering into this Agreement as the Parent or Legal Guardian for a minor that is under 18 years of age and that I also have the authority to do so on behalf of the child or ward's other parents or legal guardians. EACH OF THE PARTIES HERETO HEREBY IRREVOCABLY WAIVE ANY AND ALL RIGHT TO TRIAL BY JURY IN ANY LEGAL PROCEEDING ARISING OUT OF OR RELATED TO THIS AGREEMENT. The undersigned understands and agrees that novel coronavirus infections ("COVID-19") have been confirmed in the state of Florida and that COVID-19 is an extremely contagious virus that spreads easily through person to person contact. The City of Orlando / Orlando ASAS is following guidelines issued by the Florida Department of Health and the Centers for Disease Control and Prevention (CDC) in developing protocols for preventing the transmission of COVID-19 at OCPS facilities. Due to the nature of the program, I acknowledge that physical distancing of six (6) feet per person is not possible. Despite the City of Orlando / Orlando ASAS' reasonable efforts to mitigate the risk of exposure to COVID-19, the undersigned acknowledges and understands that there are known and unknown risks in participating in the programs, and/or participating children may be exposed to COVID-19, which could result in quarantine, serious illness, permanent disability, and/or death. Further, the undersigned warrants that he/she and/or participating children have not experienced symptoms of COVID-19 within the previous fourteen (14) days, including but not limited to, coughing, fever, and shortness of breath. I consent to having my minor child's temperature checked daily. The City of Orlando / Orlando ASAS in no way warrants that the COVID-19 infection will not occur through participation in our programs or using OCPS facilities. I agree to comply with the Florida Department of Health and the Centers for Disease Control and Prevention (CDC) guidelines applicable to COVID-19 in use of the City of Orlando ASAS services, equipment and premises and participation in the City of Orlando ASAS programs and activities. I understand that the terms of this agreement are legally binding and certify I am signing after having carefully read this agreement.

Sign/Initial:

(Parent/Legal Guardian Signature)

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PARTICIPANT GUIDELINES ** Read Carefully Before Signing Below. **

Our programs are recreational and staffed in accordance with state licensing requirements. We strive to make our programs a wonderful experience. We have a caring and competent staff that will always treat your child with dignity and respect. However, we are not able to provide one-on-one supervision for your child. To ensure the safety of all of the children and staf1 we have the following expectations. We understand that certain changes in routine, medications and home environment can occasionally cause behavioral problems. Children may not bite, hit or otherwise injure another participant or staff member. If this occurs, the following policy will apply. After the first incident, the parent or guardian will be contacted and asked to pick the child up immediately. If a second incident occurs, the child will be suspended from programs for 2 days. The third occurrence is cause for expulsion from our recreational programs. Progressive consequences will be applied to other disciplinary infractions, including verbal abusiveness. In the event that your child has a behavioral problem, an incident report will be sent home with your child. For youth that ride or walk to the camp, parents will be notified by phone. The City has the right to suspend or dismiss your child from the program if the child continues to display unacceptable behavior. Parents are encouraged to discuss the behavior as soon as possible with the staff. In addition, summer camps frequently provide field trips. All participants must stay with their group. If a camper refuses to comply and leaves the group more than once, he/she may not be eligible to attend future field trips. In addition, participants should be able to use restroom facilities with minimal assistance and be able to eat meals and snacks unassisted. The City of Orlando's goal is to be as inclusive as possible in providing recreational opportunities for all youth. If there are questions regarding a child's ability to participate in our program, the City of Orlando may require an individualized assessment. Picking your child up on time is an important part of summer camp programs. Following is our late pick-up policy; the first late pick-up will result in recreation staff verbally explaining the policy to you and the person authorized to pick up your child, and documenting the occurrence. The second late pick-up will result in documentation of the occurrence and a warning that a third late pick-up will result in the removal of the child from the program. The next late pick-up will result in the child's removal from the program.

Sign/Initial: (Parent/Legal Guardian Signature)