

# 2023 KORE AFTER SCHOOL PROGRAM FORMS / DOCUMENTATION OVERVIEW

#### TO BE SUBMITTED OR COMPLETED ON SITE

- Parent/Guardian provides Copy of Birth Certificate to confirm age
- If select "yes" to Walk/Bike Home from Center, Parent/Guardian to share specifics with staff
- If child has medications, Parent/Guardian to provide Medication Authorization Form & Details

# ADDITIONAL INFORMATION AVAILABLE ON THE WEBSITE (www.knoxvilletn.gov/recprograms then click "After School Program")

- Medical Authorization Form (to complete in advance and ready to turn in)
- Handbook with Overview of Policies & Forms to sign off on during Registration

# FORMS TO BE COMPLETED ELECTRONICALLY DURING REGISTRATION

(Red = Header/Title of Form) (Green – Options to Select from Online)

#### **Overview**

A parent/guardian must complete the areas below to successfully complete the KORE After School Program registration.

Many areas are required with only one option to agree with the information provided. If you can not agree to the option provided, the child can not be registered for KORE After School Program.

If you have any questions and/or need additional assistance with this form, please email kprd@knoxvilletn.gov

Once registration is successfully completed, you will receive an email with the text from the forms. The email is an overview of the forms and does not include your responses. Response records are available upon request.

#### DROPDOWN - (required) - 1 option

#### **School Attending**

What school does your child attend? (if homeschool, please enter "homeschool")

**TEXT FIELD** – (required)

Blank space to type response

#### **Authorized Persons for Pick-Up**

Please add any and all people who may pick-up your child to your account as an Authorized Pick-Up as Emergency Contacts and Authorized Pick-Ups may be different.

**DROPDOWN** – (required) – 1 option

I understand that I must add Authorized Pickups to my account

#### First Emergency Contact Name & Relation

Please list the Emergency Contact Name & Relation to the child (for example, Jane Doe, grandmother)

**TEXT FIELD** – (required)

Blank space to type response

# **First Emergency Contact Phone Number**

**TEXT FIELD** – (required)

Blank space to type response

#### **Second Emergency Contact Name & Relation**

Please list the Emergency Contact Name & Relation to the child (for example, Jane Smith, aunt)

**TEXT FIELD** – (required)

Blank space to type response

# **Second Emergency Contact Phone Number**

**TEXT FIELD** – (required)

Blank space to type response

# Third Emergency Contact Name & Relation

Please list the Emergency Contact Name & Relation to the child (for example, John Jones, family friend)

**TEXT FIELD** – (required)

Blank space to type response

# **Third Emergency Contact Phone Number**

**TEXT FIELD** – (required)

Blank space to type response

# **After School Program – Participant Eligibility Requirements**

Basic participation skills are required of each participant in order to participate in KORE After School Program. Participants must be able to meet these standards with minimal assistance.

- Be between the ages of 6 and 12 by the first day of camp or between the ages of 12 and 15 for Teen Camp on the first day of camp
- Actively participate in planned activities during an 8-hour camp day
- Does not require one-on-one supervision
- Able to understand, follow and accept directions and maintain self-control
- Takes turns and shares in a cooperative manner
- Respects others, their property/belongings, and personal space
- Able to stay with his/her assigned group
- Able to maintain personal care (i.e. eating, dressing, toileting, etc.)

I understand that my child may be dismissed from camp if not able to display these participant eligibility requirements during camp.

# DROPDOWN - (required) - 1 option

I confirm that my child meets these standards with minimal or no assistance.

#### **Code of Conduct**

The City of Knoxville Parks and Recreation Department is dedicated to providing an outstanding After School Program for the youth of the Knoxville area. To accomplish this goal, participants are expected to behave appropriately and promote a safe, fun, and healthy

environment through productive participation. We ask that all participants and parents/guardians read this code together before arriving for the summer.

All participants are required to:

- "Show respect to program staff and follow rules and directions at all times
- "Solve problems positively
- "Be respectful of all property and equipment
- "Wear appropriate clothing for all activities
- "Not engage in any acts of bullying or physical/sexual/verbal abuse
- "Stay with assigned group and leave only with the permission of a staff member
- "Not bring any weapons, firearms or objects that threaten or cause harm to others or self
- "Must follow the medication policies and not carry any over the counter or prescription medicines.

NOTE: It is not possible to anticipate every situation that may arise. In the absence of a particular situation or activity not listed above, COMMON SENSE AND COURTESY SHALL PREVAIL.

#### **CONSEQUENCES:**

Our staff will immediately investigate all incidents. Should a child's behavior be deemed inappropriate, our staff will handle the situation with appropriate discipline practices. This includes "timeouts" from the group and notifying the parent(s).

If a child does not or cannot respect his or her fellow participants, our staff, the environment, and/or the entire camp community and does not respond to our intervention, further disciplinary action will be taken up to and including dismissal from our summer program.

By checking the box, I have read and agree to the Code of Conduct set forth by the City of Knoxville Parks and Recreation Department and will review said policy with my child(ren) prior to the beginning date of the K.O.R.E. After School Program.

DROPDOWN - (required) - 1 option

I have read and understand the Code of Conduct

# **Reasonable Accommodation Request**

A reasonable accommodation may be requested due to a child's disability.

I understand that the City of Knoxville ("City") requires at least 10 business days to review and respond to my request. I agree to provide documentation of my child's disability upon the City's request. I understand that the City is not required to approve requests that it determines are unreasonable or that would result in a direct threat, an undue burden, or a fundamental alteration of a program, service, or activity. I understand that the City will determine whether and what accommodation, if any, to approve. I also understand that my child cannot participate in the KORE program until I have provided appropriate information about the accommodation needed and have received a response from the City.

#### DROPDOWN - (required) - 2 options

#### No reasonable accommodation requested

Yes, I would like to request a reasonable accommodation. I have read and understand the information in this section.

#### THIS APPEARS IF "Yes" IS SELECTED IN ABOVE

# **Reasonable Accommodation Request 2**

Please provide details of the requested accommodation below (please be very specific, include examples of any successful accommodations used in the past):

Also, please follow-up with documentation to the City's ADA Coordinator, Stephanie Cook, at scook@knoxvilletn.gov and Sheryl Ely at sely@knoxvilletn.gov
This information will be included in the confirmation email received following completion of registration.

#### PARAGRAPH – (required)

#### Blank space provided to type response

#### **Medication Authorization Form**

Ability for Child to Take Prescribed Medication at the Center

If your child requires medication of any kind (including over-the-counter, epi-pen, antibiotic, antiviral, etc.) during the After School Program, a Medication Authorization Form (or official documentation from Physician – see below for more info) must be completed & submitted prior to medicine being dropped off and your child receiving the medication while attending the camp. Parents are responsible delivering medication to staff at the appropriate location in the original container with the labels attached. Staff cannot accept any expired medications. Any changes require a new Medical Authorization Form or for parent/guardian to request the

medicine back to end medication process. Medications will be administered under the direct supervision of a trained staff member and the administering of medication will be documented. Medications may only be taken through the mouth or applied to skin.

#### All medication must:

- Have written permission with the signature of the prescribing physician (valid for the entire summer program), and parent's signature. The form is available on the website www.summercampknoxville.com
  - Official documentation from the physician are also allowed, such as office stationary or prescription pad in lieu of the Medical Authorization Form. These forms must include all of the following: child's name, date of birth, duration, medication name, dosage amount, time to take medication, and sequence (if more than one medication being taken), any side effects for staff to be aware of, and physician's signature with date signed.
- NOT be the first dose of a new medication
- Be in the original container with the current prescription label or direction label attached, and the prescription must not be expired.
- Be labeled with the child's name, the name of the medication, the dosage amount, and the time/times to be given.
- Be picked up on the last day of your child's participation in camp OR be picked up when the medication expires. (Staff will properly dispose of any medication that has not been retrieved.)

Use of epinephrine (epi-pens) requires a Medical Authorization Form. Staff may only give premeasured, prescribed doses of epinephrine. If repeat doses are prescribed, an epi-pen for each injection is required.

The City of Knoxville is not responsible for unauthorized medication taken independently by the child.

Please indicate that you have read and understand the policy below. It is the parent/guardian responsibility to obtain, complete, and submit the Medical Authorization Form.

# $DROPDOWN-(required)-1\ option$

# I have read and understand the medication policy

#### Walk/Bike Permission Form

If you would like to give your child permission to walk or bike to and from the Community Center, read below and select "Yes" at the end. If not, select "No" at the end of this area.

If "yes" is selected, I give my child permission to walk or bike to and from the Community Center.

My child understands that he/she will sign him/herself in and out of camp each day. Child can only sign self out at the end of the day (if child requests to leave or needs to leave during they day for any reason, the parent/guardian will be contacted and must approve their child leaving early).

I understand that the City of Knoxville Parks and Recreation Department is not responsible for my child's supervision or well-being on the way to or from the Community Center.

If my child will not be in attendance, I will contact the KORE After School Program staff to inform them of any changes in my child's schedule.

Please discuss with staff before camp begins or on the first day. Additional details and/or discussion with staff may be required.

**DROPDOWN** – (required) – 2 options

No. My child is not permitted to walk/bike or sign self out

Yes, my child is permitted to walk/bike to/from home

(If yes, parent/guardian must share specifics with staff. Please bring child on first day)

#### **Birth Certificate**

I understand that I must bring a copy of my child's birth certificate to the Community Center before camp begins or on the first day of camp that my child attends.

I understand that failure to bring the Birth Certificate will result in my child not being able to attend the camp until it is submitted.

DROPDOWN - (required) - 1 option

I have read and understand a copy of Birth Certificate is required.

# **Activity/Program - Permission/Release**

I, the parent/guardian of the child being registered, give my permission for my/our child to attend and participate in events, field trips, and related activities. I realize that the child's attendance at, or participation in the event and related activities may result in personal injury or property damage. I also realize the inherent risks involved with such event and activities and appreciate the nature of the risks. I are hereby informed, understand and agree that the City of Knoxville will not be responsible for any personal injury and/or property damage that may

result from or arise out of the child's attendance at or participation in the event and related activities.

Therefore, I intending to be legally bound do hereby for myself/ourselves, heirs, executors and administrators, waive and release any and all claims for personal injury and/or property damage, of whatever kind of nature, that I may have against the City of Knoxville, its officers, employees, agents and/or persons acting on behalf of any of the foregoing entities, arising out of or resulting from including, but not limited to, traveling to and from the event.

The schedule of field trips will be available on the site's calendar available at www.summercampknoxville.com, shared with you on the first day of camp, and updates shared at the site as changes may occur to the schedule.

#### **DROPDOWN** – (required) – 1 option

#### I have read and agree to give my permission to the above

#### Photo Release

I give permission for the free use of my/our child's name and picture in any newspaper article, broadcast, release, or other such account of this event.

If there are extenuating circumstances (child in protective custody, for example), please share with staff on the first day of camp.

#### DROPDOWN - (required) - 1 option

# I have read and agree to give my permission to the above

#### Release

I have been informed and understand that the City of Knoxville will not be responsible for any damages that may result from my child's participation in the K.O.R.E. After School Program. In consideration and as a condition of acceptance into the K.O.R.E. After School Program, I, intending to be legally bound, hereby for myself, my heirs, executors and administrators, waive and release any and all claims for personal injury or property damage, of whatever kind and nature, my child or I may have against the City of Knoxville, its officers, employees, agents and/or persons acting on behalf of any of the foregoing entities or persons which arise from or out of my child's participation or attendance in the K.O.R.E. After School Program, and related activities. I attest and verify that my child is physically fit and realize that his/her participation in the K.O.R.E. After School Program may result in personal injury or property damage.

I give my permission for the free use of my child's name and picture in any newspaper article, broadcast, telecast, or other written account of this camp.

### DROPDOWN - (required) - 1 option

# I have read and understand

# Parent/Guardian Sign Off

Parent/Guardian: Enter your name and today's date to signify who has completed the information in this section.

**TEXT FIELD** – (required)

Blank space to type name & date

[END]