NMHS Bridges Afterschool

Registration & Enrollment | Session 3, Jan. 6 - Feb. 21

Dear NMHS families:

Please fill out the attached registration and enrollment forms to get signed up for session three of Bridges. (**Registration forms** only have to be completed once each school year, so you skip straight to the **enrollment form** if you already completed a registration form after July 1st of 2024.)

Important notifications/reminders:

- Bridges will be training a team to compete in this year's statewide *Jr. Iron Chef*, held on March 29th in Essex Junction. The team will be capped at ten students, and, of those ten students, only about half may end up competing at the state level (depending on competition rules, budget, interest, etc.). Those not competing at the state level will participate in all NMHS-based activities before and after the competition, and they will also be encouraged to attend the competition as supportive non-competing teammates. The ten students enrolled in the activity will be selected by lottery, and those representing NMHS at the statewide competition will be selected based on a skills assessment prior to the event date. Event information is available at https://vermontafterschool.org/jr-iron-chef-vt/
- Please do not sign up for Bridges if you (the child) are not planning to participate in the planned activities. People have been showing up expecting to be able to just hang out, and that is not an option. Occasionally, participants who are struggling are allowed to take breaks from the programmed activities, but this is the exception and not the rule. If, for example, you do not wish to do "Tea Time" or "Minecraft," please do not sign up for Monday afternoons this session.
- Bridges is on the lookout for adult staff and volunteers. Please let me know if you or someone you know is interested.
- Guardians, please remember to call or email me if your child will be absent from Bridges on a day when they are signed up. Alternatively, you can fill out and submit the Bridges Opt-Out Permission form, attached and located on our website. This form will grant your child blanket permission to opt out of Bridges whenever they wish (in which case I will not worry if they don't show up).

As always, I welcome all feedback and questions.

Sincerely Yours,

Ryan Harlow

802-433-7062 rharlow@cvsu.org

Step 1: provide your contact information

Student Name:	Name of Guardian:			
Guardian's Phone Number:	Guardian's Email:			

Step 2: circle your activity choice for each day (activity descriptions on reverse side)

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Mondays	O Tea Time O Not attending Bridges this day	0 Minecraft
Tuesdays	O Outdoor Adventures O Not attending Bridges this day	O Game Room
Wednesdays	O Dungeons & Dragons O Not attending Bridges this day	O Halfway Hangout
Thursdays	O Jr. Iron Chef Not attending Bridges this day	O Crafting Club
Fridays	O Jr. Iron Chef Not attending Bridges this day	O Crafts with Judy
Sundays	O Weekend Game Knight (3: O Not Attending Sundays	30 p.m. – 6:30 p.m.)

Step 3: hand completed form to Ryan (Bridges room) or to the front desk

Bridges Activity Descriptions

Minecraft with Asahi

Welcome to a cubic universe where we'll learn about things such as teamwork, strategy, and more. You'll be joined by many others in your Minecraft adventure, including your experienced Minecraft master of ceremonies, Asahi!

Crafting Club with Anastasia

Crafts will always be a popular favorite! We've got the glue guns, scissors, popsicle sticks, etc. You bring the creativity! And, if you have a favorite craft of your own, let Anastasia know so she can try to work it in.

Tea Time with Sonya

In this activity, participants will explore tea cultures of the world while also playing games and enjoying social time.

Halfway Hangout with Asahi

The weeks are long, and being a kid can be exhausting. This group will socialize, watch movies, listen to music, etc. Consider this a midweek chill time!

Crafts with Judy

Judy is a crafting master, and she's here to share those skills with you! This is another great activity for those who love art, or who love getting to bring something home with them at the end of the day!

Game Room Leadership with Luke

Come hang out with friends in the NMHS student gaming center on the middle school floor. Together, you'll learn teamwork, sportsmanship, and leadership as a gaming community!

Outdoor Adventures with Sonya

Enjoy the brisk winter air! An outdoor adventure could include anything from a hike to sledding. Please bring warm clothes and footwear appropriate for winter weather.

Dungeons & Dragons with Luke

Feed your inner paladin (or barbarian, or wizard, or rogue...) by participating in this classic fantasy game. Let the adventure begin!

Jr. Iron Chef

You will hone your skills in preparation for a statewide cooking competition held on March 29th in Essex Junction. Only ten students can be on the team, and only some of those students may end up representing NMHS at the competition. This activity spans the third and fourth sessions of the school year, so plan to stick with it, please.

Game Knight with Luke (Sundays 3:30–6:30 pm)

This one's for all the die-hard gamers out there looking for extended gaming and social opportunity. Game harder, longer, and smarter than ever before!

CVSU Afterschool

Northfield Orange Washington Williamstown

Registration Form 2024-2025

This form needs to be completed only once per year (July 1 to June 30) unless any information has changed.

1. Student Information					
Student's Name:	s Name: DOB:				
Mailing Address:					
School:	Grade: Te	acher (elementary only):			
2. Parent Information					
Name of Parent(s)/Guardian(s): Mailing Address (if differentfrom abo Employed at:	ve):				
Home phone #:	Work #:	Cell #:			
*It is absolutely crucial that we have a phone nu	ımber where parent/guardia	n can be reached during aftersc	hool/summer progra	am time.	
Email address:					
If student also lives with another pare Name of Parent(s)/Guardian(s): Mailing Address: Employed at:					
Home phone #:	Work #:	Cell #	:		
<u> </u>		_			
3. Health Information					
• Does your child need to take any m	edication during afters	chool program time?	☐ YES	□ NO	
• Does your child have an illness, alle	rgy, health problem, o	r disability?	☐ YES	□ NO	
Does your child have an IEP?			☐ YES	□ NO	
• Does your child have a 504 Plan?			☐ YES	□ NO	
 Does your child wear glasses or con 	tact lenses?		☐ YES	□ NO	
 Does your child have social, emotio 	nal, or behavioral chall	enges?	☐ YES	□ NO	
If you answered yes to any of the ab how we can best support their afters child, we may require a doctor's note	school experience, ple	ase use the space below			
Do you have health insurance for you	r child?	□NO			
Name of child's doctor:		Phone #:		<u></u>	
Name of child's dentist:		Phone #:			
4. Pick-Up Permission					
Safety is our highest priority! Other to your child? The individuals must be a identification. Any changes to this list	t least 16 years old and	I must be able to show a	least one form	• •	
Name:	Phone	#:	Relationship:		
Name:					
Name		# •	-		

5. Agreement to Terms

Please initial to indicate your acceptance of/agreement with each item below. (Not initialing indicates that you do not accept/agree to the terms.)						
I authorize the <i>CVSU Afterschool Program</i> to access my child's school file, including but not limited to health records, free and reduced lunch status, and special education accommodations.						
I authorize CVSU Afterschool staff to consult with my child's teachers and other school personnel regarding my child's needs. I understand that information will be shared on an as-needed basis only.						
I understand that photographs or videos may be taken for publicity purposes. I give permission for my child's image(s) to be used.						
I give permission for surveys to be given to my child and my family for program needs.						
I give permission for my child to participate in offsite walking field trips. <i>Permission forms will be sent home prior to field trips requiring transportation</i> .						
I give permission for my child to participate in wadingactivities.						
I give permission for my child to participate in swimmingactivities.						
I allow CVSU Afterschool Program staff to apply sunscreen, insect repellent, antibiotic cream, and other topical first-aid products to my child.						
If walking field trips are interrupted by inclement weather, I authorize vehicular transportation for my child back to the program site without requiring further notification of such transportation.						
I authorize the <i>CVSU Afterschool Program</i> to access my child's immunization records on file with the school. I understand that, if I deny this authorization, I am required to provide immunization records directly to the <i>CVSU Afterschool Program</i> before my child can participate.						
I have received the CVSU Afterschool Family Guidebook; I have read, understand, and agree to the policies stipulated therein.						
 6. General Release A) I hereby give permission for my child to participate in the CVSU Afterschool Program. I assume all risks and hazards, incidental to such participation, including transportation to and from activity, and I hereby waive, release, absolve, indemnify, and agree to hold harmless the CVSU Afterschool Program, Central Vermont Supervisory Union, their officers, agents, officials, employees and volunteers, the organizers, sponsors, supervisors, and participants for any claim arising out of an injury to my child. I will notify CVSU Afterschool if any information about my child changes. 7. Medical Release B) In the event that my child is injured or needs medical help, I understand that the hospital personnel will attempt to contact me before administering treatment to my child. If I cannot be reached, I hereby give permission for the 						
person(s) named below to be called forauthorization. We must have this information. Name: Relationship to Child:						
Home: Work: Cell:						
Name: Relationship to Child:						
Home: Work: Cell:						
C) I authorize <i>CVSU Afterschool Program</i> staff to obtain emergency transportation and medical care for my child at a hospital or physician's office at my expense. I understand that I will be notified first if at all possible.						
Signature of Parent/Guardian:Date: Printed Name of Parent/Guardian:						

Registration of Additional Child(ren)

If you have (an)other child(ren) to enroll in the same CVSU Afterschool Program and for whom all of the information in Sections 2, 4, 5, 6, and 7 is the same, you may use this form to enroll the other child(ren). You may make copies of this form if necessary. If any information other than that in Sections 1 and 3 differs for the additional child(ren), or if additional child(ren) will attend a different CVSU Afterschool program, please complete a separate registration form for them.

1. Student Information				
Student's Name:		DOB:		
Student's Mailing Address:				
Student's School:			_Teacher:	
3. Health Information				
• Does your child need to take any medication	during afters	chool program time?	☐ YES	□ NO
• Does your child have an illness, allergy, healt	h problem, or	disability?	☐ YES	□ NO
• Does your child have an IEP or 504 Plan?	•	·	☐ YES	□ NO
• Does your child wear glasses or contact lense	es?		☐ YES	□ NO
• Does your child have social, emotional, or be	havioral chall	enges?	☐ YES	□ NO
Do you have health insurance for your child?	☐ YES	□ NO		
•				
Name of child's doctor:				
Name of child's dentist:		Phone #:		
☐ I certify that the information in Sections for this child.	2, 4, 5, 6, and	l 7 of the original reg	istration form is the	e same
Parent Signature			Date	<u> </u>

This form MUST be attached to the original registration form.

CVSU Afterschool Transportation Form School Year 2024-25

Northfield

Student Na	ame:				
Parent Na	me:				
Parent Pho	one Number:				
Afterschoo	ol Program Location:				_
How will	your child get home from the Afterschool Program? \Box \lor	Valk [□ Pick	up 🗆 Bus	
Actual pici	ne bus, please indicate your stop below. k-up and drop-off times may vary due to travel conditions. Pleas hed time for actual arrival. You will be notified of any bussing de				re and after
		p.m.			
	Dogwood Glen/VT Route 12 Intersection	5:07			
	Doyon Road/VT Route 12 Intersection	5:08			
	Falls Trailer Park	5:10			
	Burnham Road/VT Route 12 Intersection	5:13			
	Falls Post Office	5:15			
	76 VT Route 12A	5:21			
	Fairground Road/VT Route 12A Intersection	5:24			
	Smith Hill/Stoney Brook Road Intersection (Gillespie Fuel)	5:26			
	Bull Run/VT Route 12A Intersection	5:27			
	Mobil Station, VT Route 12 South	5:30			
Malkers: If Jnion After Bus Riders: Drivers' Prounderstand grade 6-12 them, and Pick-Ups: If	ting this form, I acknowledge that my child will depart from the Afters to my child's transportation plan must be communicated in writing my child is a walker, I understand that, once they have signed out the reschool Program is no longer responsible for their safety. If my child rides the late bus, I acknowledge that I have read and I procol for Student Drop-Off on the reverse of this form. If my child is I that they will be dropped off at their stop only if an authorized per and rides the late bus, I understand that they will be dropped off that it is my responsibility to ensure my child's safety at this time. The my child is a "pick-up," I understand that they will be released on the Registration Form.	for the day understar s in grade erson is pr at their st	e Site C y, the C and CVSU K-5 and esent t op whe	Coordinator. Central Vermont Sup J Afterschool's Late d rides the late bus to meet them. If meether or not an adu	pervisory e Bus s, I y child is in ult meets
Parent/Gu	ardian Signature:	Date:			
ar ciriy ou					
Please prin	t Parent/Guardian name here:				

CVSU Afterschool Late Bus Drivers' Protocol for Student Drop-Off

- Students in grades K through 5 who ride the late bus will be dropped off only if an authorized person is present to meet them.
- The CVSU Afterschool site coordinator will provide the bus driver with a list of persons authorized by each student's parent/guardian to meet the student.
- The bus driver will ask for photo identification from the person meeting the student at the bus stop unless/until the driver is familiar with the authorized persons.
- The bus driver will not release a student to any person who is not on the list of authorized persons.
- CVSU Afterschool will inform parents/guardians of K-5 students that the authorized person should come to the door of the bus to meet their student and should be prepared to show photo identification to the bus driver.
- CVSU Afterschool requires that parents/guardians submit changes to a student's transportation plan to the site coordinator in writing. This includes changes or additions to persons authorized to meet students at the bus stop.
- If a student in grades K-5 is not met by an authorized person at the bus stop, the student will remain on the bus and the bus driver will call the site coordinator who will attempt to contact the student's parent/guardian.
 - If a parent/guardian can be reached and is able to report to the bus stop within 2 or 3 minutes, the driver will wait for the parent/guardian to arrive.
 - If a parent/guardian cannot be reached or cannot report to the bus stop within a few minutes, the student will be returned to school, where they will be met by the afterschool site coordinator or their designee.