



Hello, Echo Valley Community,

The winds of winter have arrived, the holiday break is quickly approaching, and we're gearing up for another awesome session of ONWARD Afterschool! <u>Session 3 will start on **Monday**</u>, <u>**January 6th**</u>. To register and enroll your student(s), please review the checklist below and complete the necessary pages from this packet.

For those of you who may not be familiar with what we do, ONWARD Afterschool offers a safe, fun, and enriching afterschool experience for students in the CVSU community. We are educators and community members who believe in building a sense of community while helping students to recognize and realize their potential. Students in our programs are given the opportunity to express themselves in a variety of interesting and enriching activities.

Thank you for being a part of the ONWARD community! If you have any questions, comments, concerns, or just want to chat about our program, please feel free to reach out to me!

Sincerely,

Tyler K. Beede Administrative Site Coordinator 802-433-3964 <u>TBeede@cvsu.org</u>

IMPORTANT:

PLEASE READ THE FOLLOWING BEFORE COMPLETING THESE FORMS

If this is your child(ren)'s **first time attending ONWARD this year**, you will need to complete the following:

- Registration Form (Completed once per school year)
- Enrollment Form (Completed once per session)
- Family Contribution Form (Completed once per school year)
- Transportation Form (Completed once per session)

If your student(s) **registered for Sessions 1 or 2, or ONWARD Summer 2024**, you will need to complete the following:

- Enrollment Form (Completed once per session)
- Transportation Form (Completed once per session)

THE REFRIGERATOR PAGE IMPORTANT DATES

REMINDERS

EARLY DISMISSAL POLICY ONWARD DISMISSES BETWEEN 4:45PM AND 5:00PM. IF YOU PLAN TO PICK YOUR CHILD UP BEFORE THIS TIME, PLEASE LET US KNOW BY EITHER SENDING AN EMAIL TO TBEEDE@CVSU.ORG OR CALLING AND LEAVING A MESSAGE AT THE SCHOOL! THIS WAY WE CAN MAKE SURE THEY'RE READY TO GO WHEN YOU ARRIVE. SESSION 3 STARTS: JANUARY 6TH SESSION 3 ENDS: FEBRUARY 21ST

EARLY RELEASE DATES

NO ONWARD

DECEMBER 23RD - JANUARY 3RD- HOLIDAY BREAK JANUARY 20TH- MARTIN LUTHER KING DAY JANUARY 27TH- INSERVICE FEBRUARY 24TH - MARCH 7TH- WINTER BREAK

HELP WANTED!

LOOKING FOR SOMETHING TO DO BETWEEN 3:00PM AND 5:00PM ON WEEKDAYS? WE ARE LOOKING TO ADD TO OUR TEAM OF AFTERSCHOOL PROFESSIONALS! REACH OUT TO TYLER AT TBEEDE@CVSU.ORG FOR MORE INFORMATION!

TO ENROLL ONLINE...

JUST POINT YOUR PHONE'S CAMERA AT THE OR CODE TO VISIT OUR ONLINE ENROLLMENT FORM!



Session 3 (January 6, 2025 - February 21, 2025)	Plea us	ase complete the following ONLY on early release d olled for Wednesdays with	Day Enrollment if your student will be joining <u>ays</u> . If your student is already o ONWARD, you do not need to his section.
Parent/Guardian Name: Parent/Guardian Phone:		Day February 12th	Attending
Parent /Guardian Email :			

Please select the day(s) your child will attend, then choose which activity they will	Activity Descriptions
be participating in. Activities are filled on a first-come, first-served basis, but we will try to accommodate everyone's choices whenever possible!	Lego Challenge: Building it Big- Get ready to think BIG! Each week, students will be presented with a new building challenge focused on building things that are, well, BIG, while exercising skills like measuring, pattern recognition, and planning.
• Monday	Mindful Monday- Starting the week with some mindfulness is a great way to set a positive tone for the days ahead. Join us in the ONWARD
🔲 Lego Challenge: Building it Big	room as we learn about mindfulness, create fidgets, and more!
🗌 Mindful Monday	It's Trivial- Put your thinking caps on! Each Tuesday, students will be challenged to a new game of trivia, then be given the opportunity to create a trivia game of their own!
Tuesday	Theater Club- Feeling dramatic? Then this is the place for you!
🗌 It's Trivial	Students will focus on building skills like acting, set design, costume creation, and teamwork as they build up to an end-of-session performance!
Theater Club	Too Cool not to Craft- With the weather getting colder, sometimes it's nice to just sit inside and craft. Join us in the ONWARD room for an afternoon of cool crafts and even cooler vibes!
Wednesday	
Too Cool not to Craft	Lego Challenge: Team Building- Our Lego Challenge group has been a hit, so we're offering it twice per week this session! Wednesdays' Lego Challenges will be focused on working together as a team, with
🔲 Lego Challenge: Team Building	students working in groups to complete the week's building challenge.
Thursday	Gym Time: Basketball- Get ready to hit the gym! This session's focus will be on basketball. If you're playing on a team and want more practice, or just want to play some ball, this is the place to be!
🔲 Gym Time: Basketball	Jewelry Making- Join us on Thursdays in the ONWARD room as we
Jewelry Making	learn to assemble different types of bracelets, necklaces, rings and more!
Friday	Fun Friday- Fridays are for catching up and having fun in the ONWARD room. Every Friday, students will be given the opportunity
🗌 Fun Friday!	to complete a project from earlier in the week or participate in an activity of their choice as we focus on FUN before heading into the weekend.

CVSU Afterschool

Northfield Orange Washington Williamstown

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:	DO	B:		_
	Grade: Teacher (element			
2. Parent Information				
Name of Parent(s)/Guardian(s	s):			
Mailing Address (if different fr	om above):			
Employed at:				
Home phone #:	Work #: phone number where parent/guardian can be reached d	Cell #:		
*It is absolutely crucial that we have a	phone number where parent/guardian can be reached d	uring afterscho	ool/summer progr	am time.
Email address:				
If student also lives with anot	her parent or guardian: s):			
	····			
Employed at:				
Home phone #:	Work #:	Cell # :		
3. Health Information				
• Does your child need to tak	e any medication during afterschool program	time?	□ YES	
• Does your child have an illn	ess, allergy, health problem, or disability?		□ YES	
• Does your child have an IEP			□ YES	
• Does your child have a 504			□ YES	
• Does your child wear glasse			□ YES	
	emotional, or behavioral challenges?		□ YES	□ NO
If you answered yes to any o	f the above questions, or would like to share	e any other	information a	bout your child a

If you answered yes to any of the above questions, or would like to share any other information about your child and how we can best support their afterschool experience, please use the space below. *In order meet the needs of your child, we may require a doctor's note before a student may participate.*

Do you have health insurance for your child?	□ YES		
Name of child's doctor:		Phone #:	
Name of child's dentist:		Phone #:	

4. Pick-Up Permission

Safety is our highest priority! Other than the parent(s)/guardian(s) listed above, who has your permission to pick up your child? The individuals must be at least 16 years old and must be able to show at least one form of picture identification. Any changes to this list must be communicated in writing to the site coordinator.

Name:	Phone #:	Relationship:
Name:	Phone #:	Relationship:
Name:	Phone #:	Relationship:

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 CVSU Afterschool Program 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</i> to field trips requiring transportation.
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 CVSU Afterschool Program 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 CVSU Afterschool Program 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 *CVSU Afterschool Program* 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:	Grade:	Teacher:	

3. Health Information

• Does your child need to take any medication during afterschool program time?	□ YES	🗆 NO
 Does your child have an illness, allergy, health problem, or disability? 	□ YES	🗆 NO
 Does your child have an IEP or 504 Plan? 	□ YES	🗆 NO
 Does your child wear glasses or contact lenses? 	□ YES	🗆 NO
 Does your child have social, emotional, or behavioral challenges? 	□ YES	🗆 NO

If you answered yes to any of the above questions, or would like to share any other information about your child and how we can best support their afterschool experience, please use the space below. *In order meet the needs of your child, we may require a doctor's note before a student may participate.*

Do you have health insurance for your child?	□ YES	□ NO
Name of child's doctor:		_Phone #:
Name of child's dentist:		_Phone #:

□ I certify that the information in Sections 2, 4, 5, 6, and 7 of the original registration form is the same for this child.

Parent Signature

Date

This form MUST be attached to the original registration form.

We depend on family contributions to continue to offer quality programs. However, all CVSU students are welcome regardless of their family's ability to pay. Please use this form to determine our suggested per-child contribution. If that amount is more than you can afford, we ask you to pay what you can. If you have any questions or concerns, please call Cara Sargent at 802-433-7060.

CVSU AFTERSCHOOL Family Contribution Form 2024-25

Please use this table to determine the suggested amount of your family's contribution and check the corresponding box.

CVSU Afterschool Program Fees	□ Tier 1 Household income is > \$150,000	□ Tier 2 Household income is < \$150,000 and students are <u>not</u> eligible for F/R lunch	□ Tier 3 Students are eligible for F/R lunch
Daily Rate	\$10.00	\$5.00	\$2.00
	per child	per child	per child
	per day	per day	per day

Please check one option below:

□ I will pay the suggested contribution.

□ I am unable to pay the suggested contribution, but will contribute a smaller amount.

 \Box I am unable to pay anything at this time.

Please remember that all of our students are welcome, regardless of their family's ability to pay or the amount of the family's contribution.

We accept checks and cash. Please make checks out to *CVSU Afterschool* and deliver directly to the Site Coordinator or mail to **CVSU Afterschool, 111B Brush Hill Road, Williamstown, VT 05679**. Cash must be delivered directly to the Site Coordinator.

We appreciate receiving contributions at the beginning of each session. If that is not possible, we will handdeliver or mail a reminder to you during the session. You may pay in installments if that is helpful to you. Please indicate your intention to do so with your first payment.

Parent/Guardian Signature

Date

CVSU Afterschool Transportation Form School Year 2024-25

Echo Valley

Student Name:			-
Parent Name:			
Parent PhoneNumber:			_
Afterschool Program Location:			
How will your child get home from the Afterschool Program? Walk	D Pick up	🗆 Bus	

If using the bus, please indicate your stop below.

Actual pick-up and drop-off times may vary due to travel conditions. Please allow a 15-minute window before and after the published time for actual arrival. You will be notified of any bussing delay beyond 15 minutes.

	p.m.	
Echo Valley Middle School	5:00	
Donna Lane	5:02	
Gramp's Country Store	5:26	
Route 302/Reservoir	5:37	
Tucker/Spencer	5:44	
Morrie/Woodchuck Hollow	5:51	

By completing this form, I acknowledge that my child will depart from the Afterschool Program via the method indicated and that changes to my child's transportation plan must be communicated in writing to the Site Coordinator.

<u>Walkers:</u> If my child is a walker, I understand that, once they have signed out for the day, the Central Vermont Supervisory Union Afterschool Program is no longer responsible for their safety.

<u>Bus Riders:</u> If my child rides the late bus, I acknowledge that I have read and I understand CVSU Afterschool's Late Bus Drivers' Protocol for Student Drop-Off on the reverse of this form. If my child is in grade K-5 and rides the late bus, I understand that they will be dropped off at their stop only if an authorized person is present to meet them. If my child is in grade 6-12 and rides the late bus, I understand that they will be dropped off at their stop whether or not an adult meets them, and that it is my responsibility to ensure my child's safety at this time.

<u>Pick-Ups:</u> If my child is a "pick-up," I understand that they will be released only to individuals identified as authorized persons on the Registration Form.

Parent/Guardian Signature:	Date:
Please print 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.