Blue Devil Afterschool

WELCOME BACK, BLUE DEVILS, FOR AN AMAZING 2025-26 SCHOOL YEAR! Wow, another beautiful summer has gone by and you can feel the fall excitement in the air. We are excited to be running Onward again this year at WMHS with some familiar faces and both long-standing and new creative clubs–all a great way to spend your time after school in a social setting with some fun and exploration too. This year we will focus more on student-guided clubs and activities and cannot wait to see faces, both old and new, when we begin MONDAY, SEPTEMBER 8TH!

We meet each day from 3:00-5:00 p.m. in the PLC with our Onward teachers. Michelle, our phenomenal lead teacher and project organizer, and Laura, our dedicated site supervisor, are present daily. Josh, our tech guru, will be here 3 days per week this session and we welcome back Mr. DuBois for his second year with us! He will be stepping up to keep our Round Table card club running with Josh this year. We are sad to say goodbye to Mrs. Frye and Mr. Beling, our long time round table leaders, but Mr. DuBois is excited to keep the club running as it always has 🙂

We are lucky to be able to offer our Onward afterschool programming for FREE. Please reach out to Michelle Larkham at the email listed below if you have any questions or concerns about our programs or enrollment. Thank you for taking the time to view this document with your student, and for selecting from our program offerings for your participating scholar.

Blue Devil Pride!

Laura Greve and Michelle Larkham
lgreve@cvsu.org mlarkham@cvsu.org

Our WMHS ONWARD program is FREE!

- We are open to all WMHS middle- and high-school students! All of our programs are first-come-first-served until we reach capacity. Minecraft accounts fill up fast, FYI!!!
- All registration and enrollment materials must be completed and submitted before a student can be enrolled.
  - Enrollment Form (this form; see below. Also available digitally if preferred.)
  - Registration Form (includes personal and medical information on your scholar)
  - Transportation Form (provides information on how your student will get home at 5pm)
- Email Laura Greve (lgreve@cvsu.org) or Michelle Larkham (mlarkham@cvsu.org) if you have any questions or if you would prefer digital links for registration.
- All forms and other information are also available on our webpage.

Program Selection for Session 1 (Sept 8- Oct 24) on reverse.

Return the next page to the front office and they will get it to Laura's mailbox!

Programs for Session 1 (Sept 8-Oct 24) **Please select one club for each day attending.**

STUDENT'S NAME_____

Mondays	☐ Round Table	• Round table card club with Mr. DuBois and Josh! Enter the mythical worlds of Elestrals, Magic, Yu-Gi-Oh and Pokemon as you play with friends and even battle in monthly tournaments for prizes!
	☐ Snack Making Club	• Passionate about food and eating? Join us to cook and prepare snacks for our Onward participants for the entire week! (Also enjoy tasting our Universal Yums snacks subscription monthly!)
Tuesdays	☐ Minecraft	• Adventure and STEAM learning in a cubic world – full java edition – run by the very experienced and talented Josh. Not just gaming: Learn coding + more!!!
	☐ Tribes Club	• Get outside and challenge yourself as you join a team (your tribe!) and compete each week in survival challenges outdoors! Learn fire making, first aid, survival techniques and more with the adventurous Michelle.
Wednesdays	☐ Project-Based Art Club	• Join our very artistic and talented Michelle, for guided art projects of various levels and mediums. Explore your creative side and maybe join to get an art class if one didn't fit one into your daily school schedule!
	☐ Science Exploration	• Join Laura as we explore different aspects of science through student chosen (and guided) experiments!
Thursdays	☐ Minecraft	• Adventure and STEAM learning in a cubic world – full java edition – run by the very experienced and talented Josh. Not just gaming: Learn coding + more!!!
	☐ Moviemaker Club	• Engage in the world of photography and movie creation with iMovie and other programs. Michelle will guide two teams as they create movies with the guidelines, but their own individual team creativity and unique choices.
Fridays	☐ DnD- Dungeons and Dragons	• A 13+ club!- Join us for some Dungeons and Dragons- a table top, role playing game that requires creativity, team work, and problem solving within the DnD world. Student-guided dungeon masters, supervised by Laura this year.
	☐ Draw-It-Out-Of-The-Hat Club	• Student Guided. WIith Michelle, students will put project ideas into a hat and each week pick at random an activity to do. The activity will then be guided by the student who entered it as a suggestion! A fun way to play with Freestyle day.

CVSU Afterschool

Northfield Orange Washington Williamstown

2025-2026
Registration Form

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: _____ DOB: _____

Mailing Address: _____

School: _____ Grade: _____ Teacher (elementary only): _____

2. Parent Information

Name of Parent(s)/Guardian(s): _____

Mailing Address (if different from above): _____

Employed at: _____

Home phone #: _____ Work #: _____ Cell #: _____

***It is absolutely crucial that we have a phone number where parent/guardian can be reached during afterschool/summer program time.**

Email address: _____

If the student also lives with another parent or guardian:

Name of Parent(s)/Guardian(s): _____

Mailing Address: _____

Employed at: _____

Home phone #: _____ Work #: _____ Cell #: _____

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?	☐ YES	☐ NO
● Does your child have a 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 to 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 #: _____

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. *Permission forms will be sent home prior to field trips requiring transportation*.

_____ I give permission for my child to participate in wading activities.

_____ I give permission for my child to participate in swimming activities.

_____ 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 for authorization. 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 (elementary only): _____

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 to 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.

CVSU Afterschool Transportation Form School Year 2025-26

Williamstown

Student Name: _____

Parent Name: _____

Parent Phone Number: _____

Afterschool Program Location: _____

How will your child get home from the Afterschool Program? ☐ Walk ☐ 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.	
Pump & Pantry/Route 14	5:04	☐
Limehurst Mailboxes	5:08	☐
Beckett St./Route 14	5:11	☐
Martin Rd./Graniteville Rd. Intersection	5:15	☐
Robar Rd./Cogswell Rd. Intersection	5:20	☐
Lambert/McCarthy Intersection	5:24	☐

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**.

Walkers: 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.

Bus Riders: 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.

Pick-Ups: 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.