Sweden/Clarkson Recreation

Before & After School

Drop-In Program

Parent Information Packet

Sweden/Clarkson Community Center

4927 Lake Road Brockport, NY 14420

585-431-0090

It is our pleasure to offer a safe and secure drop-in before & after school recreation program in the Brockport area. Your child will participate in board games, arts and crafts, sports, open play, and games in our gymnasium. Children will be under the supervision of our trained staff which includes a Recreation Director, Recreation Assistants, and Counselors.

Your child will participate in a variety of activities that promote asset building and social interaction. We have use of a full-size gymnasium, cafeteria, outdoor playground, outdoor basketball courts, game rooms, and large activity rooms.

Hours of Operation

- **Before School:** 6:30AM-9:00AM
- **After School:** 2:30-6:00PM

*A late fee of $1.00/minute will be assessed if not picked up by 6:00pm.

Payments

Daily rate:

- Before or After: $11.00
- Both: $20.00

Weekly rate:

- Before or After: $50
- Both: $95

COVERAGE IS ONLY FOR DAYS YOUR CHILD IS PHYSICALLY IN SCHOOL

IMPORTANT INFO:

- Payments must be given to the front desk staff.
- Receipts available upon request.
- Only pay for the days you sign up for.
- Credits will only be given by request with a doctor's note.
- Food is not provided, but children are encouraged to bring it with them.

Transportation

Upon your child's enrollment you must contact the school district transportation office and arrange bus service for your child. They will be bussed from the Community Center to school, and from school to the Community Center.

Emergency Evacuations

In the case of an emergency (power outage, fire evacuation, water main break, etc), your child will be escorted from the building with the group by all staff on duty. Parents/guardians will be contacted to come pick-up each child.

Personal Items

The Recreation staff is not responsible for personal items brought to the Community Center. Please encourage your child to leave all personal items at home. We cannot assume responsibility for any personal items lost or damaged. Use of electronic items will not be tolerated under any circumstance.

Abuse

It is the policy of the Town of Sweden that if any Before & After School Staff is told about a possible child abuse or molestation, they are to immediately report it to a professional recreation staff and write up a full report. Working with children makes any staff of the Recreation Department a mandated reporter. The Program Director and Recreation Director will be notified immediately and correct action will be taken.

Rules for Drop-In Program

1. **No damaging Community Center property or building**
2. **Stay with the group. Ask staff permission before leaving the room.**
3. **You may not ask staff or other children for money.**
4. **You may not share food unless siblings or given permission from each parent.**
5. **No fighting (with words or hands) to solve arguments.**
6. **No bad words or bullying allowed.**
7. **No stealing or damaging other children or staff's property.**
8. **No intentionally injuring another child or staff.**
9. **Arguing with staff and not following directions is not allowed. (Staff should only have to give directions once).**
10. **No violating other children's or staff's personal space. KEEP YOUR HANDS TO YOURSELF.**
11. **The use of electronics is limited. Staff must have given permission, and it may only be used to contact parents/guardians.**
12. **Be Safe, Be Kind, Be Fair.**

Violation of these rules may result in write up, or removal from the program.
a. A total of 3 write ups can constitute removal from the program.

Before and After School

- **To Register**
  - Please fully complete a calendar and hand it in **WITH** payment
  - Registration and payment must be received prior to or on the date of service
  - For daily rate registrations, you will fill out a daily slip
  - For weekly registrations, register using a calendar
  - If you would like to sign up for the whole month, please use the weekly rate when applicable, and then the daily rate for the rest of the days
  - For weeks with less than five days of coverage (school breaks/days off), please use the daily rate

****For any issues, problems, concerns or unforeseen circumstances, please feel free to contact the head of the program Amanda Kinney at amandak@townofswedenny.gov , or 585-431-0088****

BEFORE/AFER SCHOOL REGISTRATION FORM

4927 Lake Road Brockport, NY 14420 Phone:(585)431-0090 Fax:431-0052
Web: swedenclarksonrec.com

Child(ren) Name	Birthdate	Gender

Household Information:

Parent Name	Email	Cell Phone	Work Phone
	Address City	State	Zip

Emergency Contact (please write name here):

Relationship to Child	Home Phone	Cell Phone	Work Phone
Address	City	State	Zip

****Pick-Up: Names & Phone numbers of individuals allowed to pick up participant and transport them home:**

Name	Phone Number

Waiver of Participation/Refund Policy/Photo Release:

Waiver/Refund Policy must be read and signed before registration is accepted. In consideration of your accepting my entry, and understanding that a certain amount of risk is inherent in some recreational programs, I hereby, for my child, my heirs, executors, and administrators, waive and release any and all rights and claims for damages I or my child may have against the Town of Sweden and its representatives, successors, and assigns and/or Town of Clarkson and its representatives, successors, and assigns for any and all injuries suffered by myself or my child at any activity sponsored by these groups or at any recreation facility, including the skate park. I also fully realize that I must provide proper medical and hospital coverage. Furthermore, in the event a refund is granted for myself or my child for whatever reason with the activities stated, I do hereby authorize the Town of Sweden to execute a refund voucher on my behalf and submit for payment under the terms and conditions set forth in the Sweden Clarkson Recreation Department Refund Policy. Refunds are subject to processing fee. **Refund Policy**: Please refer to our brochure. **Photo Release:** I understand that photos may be taken of participants during the activity. These photos will become the property of the Town of Sweden and Recreation Department and may be used to promote the program and department.

Signature: _____ **Date:**_____

Received by:_____ **Date:**_____