

TOWN OF ROCHESTER
COMMUNITY CENTER/RECREATION DEPARTMENT
PO Box 65, ACCORD, NY 12404
COMMUNITY CENTER PHONE (845) 626-3053
Office Phone: (845) 626-2115 • Fax (845) 626-0141 •
YOUTHCOMMISSION@HVC.RR.COM.

CAROL DENNIN, DIRECTOR
RITA HARKINS/SHAYE DAVIS, ASSISTANT DIRECTOR S
FUNDED BY NEW YORK STATE OFFICE OF CHILDREN & FAMILY SERVICES

This program does not deny services to participants regardless of race, creed, color, national origin, sex, or disability.

Community Center Program & Activities



PARENTS PLEASE KEEP THIS PAGE AS A REFERENCE

Dear Parents,

Snack is offered daily. We encourage parents to send their children with a snack or snack money to the Center. We will gladly store your child's labeled snacks, (i.e., cup of soup, yogurt, easy macaroni and cheese, etc.). Donating snacks occasionally for everyone to share would be very much appreciated.

Every day the staff has mandatory homework time. This allows your child to receive tutoring from the coordinators, and the opportunity to research information on the web if needed.

We follow the SCHOOL CALENDAR, and when **School is closed, we're closed**. Remember, when children have **early dismissal**, or when **after-school** activities are **cancelled**, **SO IS THE YOUTH CENTER AFTER SCHOOL PROGRAM!! PLEASE MAKE ALTERNATE ARRANGEMENTS FOR THOSE OCCASIONS.**

Attending the **AFTER SCHOOL PROGRAM** at the Youth Center is a **PRIVILEGE, NOT A RIGHT**. We have a set of rules that children must adhere to in order to be a part of the program. A 3-strike rule is in effect —*after receiving a third strike the child's right to attend the Center will be revoked until further notice.*

PARENTS MUST BE ON TIME WHEN PICKING UP THEIR CHILDREN—NO LATER THAN 5:30 PM! (Your child will lose their privilege to attend the after school if there is a frequent abuse of this requirement.) PARENTS MUST COME IN TO SIGN OUT THEIR CHILD WHEN THEY LEAVE THE CENTER DAILY.

**Please use Community Center number: 845-626-3053
between 2:30 pm – 5:30 pm Monday – Friday.**

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ACTIVITIES REGISTRATION AND PERMISSION SLIP

Name: _____

Address: _____

City/ Town/ State/ Zip _____

Date Of Birth: _____ Gender: _____ Age: _____ Grade: _____ School: _____

Ethnicity: White ___ Black ___ Hispanic ___ Native American ___ Asian ___ Other

Name Of Parents/ Guardians _____ Telephone # (Home): _____

Cell: _____ Work: _____ Email: _____

Does your Child have any allergies? _____

Is he/she currently taking any medication? _____

Does your child have any disabilities and/or health conditions that the staff should know about?

In Case of Emergency notify: *(It is important that you include a name other than your own, in case we cannot reach you.)*

Name: _____ Phone: _____

Name: _____ Phone: _____

Physician's Name _____ Phone: _____

Insurance Company And Health Policy Number _____

Hospital Preference in case of an emergency: _____

Do you have any restrictions and/or limitations on snack? _____

Below is a set of rules that must be followed. Participation in the programs at the Community Center is a privilege that can and will be revoked if your child refuses to adhere them.

1. Child must be signed in and out (first and last name) with time of arrival and departure next to their name.
2. Foul and abusive language will **NOT be tolerated.**
3. Absolutely **NO** smoking or drinking in or around the Community Center building or grounds.
4. Fighting, vandalism, abuse, or misuse of the centers facilities and equipment will revoke your privilege to re-enter the center and you may face possible consequences.
5. All supplies and use of equipment will require signing a responsibility and use form.
6. All participants will clean up after themselves. **GENERAL ROOM CLEANUP WILL BE SHARED.**
7. We REQUIRE parents to **BE ON TIME** picking up children from programs & activities. **(Your child will lose their privilege to attend the after school program if there is a frequent abuse of this requirement.)**

We have read the following set of rules:

Child's Signature

Parents Signature

Date

Date