

**2018-2019 SLC SCHOOL DISTRICT GLENDALE MIDDLE SCHOOL LOVE FOR ART AFTER-SCHOOL
PROGRAM REGISTRATION FORM**

Yes, I would like for my 7th or 8th grade student to attend the Love for Art after school program. I understand that my student will attend Monday - Friday 3pm-5:30pm. A commitment is required by the student to attend the program each day for the remaining school year through May 2019.

Student Name _____ Student number _____

Age _____ Birth Date _____ Grade _____ Male/Female

Address _____ City _____ State _____ Zip _____

Race: (Circle one) American Indian or Alaska Native, Asian, Black or African American, Hispanic or Latino, Native Hawaiian or Other Pacific Islander, White

What Country are you from? _____

What language do you speak at home? _____

Health Concerns/Allergies/Food Restrictions: _____

Parent/Guardian _____ Cell Phone _____ Text Y/N

Parent/Guardian _____ Cell Phone _____ Text Y/N

E-mail (PRINT CLEARLY) _____

Emergency Contact _____ Cell Phone _____

Relationship to student _____

Transportation: Student can (check all that apply):

Walk Home Be picked up at school Take the after-school bus

Medical Release: In the event of illness or accident while my child is attending Arte Primero after school I hereby

DO (YES) or DO NOT (NO) authorize the Love for Art staff or designee to secure medical services for my child at my expense, including doctor, hospital and ambulance services if I cannot be reached promptly by phone or if it is assessed that immediate medical help is required without time to contact me.

Photo Press Release: I give permission for photographs and video recordings of my student to be taken during Arte Primero after school program and allow them to be used by Arte Primero or Clayton Middle School in promotional materials for the school and all other program partners. YES NO

Field Trip Permission Form: Program field trips will exercise every possible precaution to ensure the safety and welfare of your child. The school and its authorized agents shall not be responsible financially or otherwise, should an accident occur during program field trips for walks, swimming, UTA and/or School Transportation to field trips. My student has permission to participate in all field trips. YES NO

Student Agreement: I agree to respect staff, teachers, students, property, supplies & environment. I will follow directions the first time given and sign-out with staff before leaving program each day. I will never leave the school building without permission by coordinator and/or staff. I will follow Clayton and SLC District Code of Conduct. Students should meet at the designated room at Clayton Middle School. Ongoing tardies will not be allowed.

Parent/Guardian Name (Please Print)

Parent/Guardian Signature

Date

**2018-2019 SLC School District Clayton Middle School Love for Art Evaluation of Afterschool Programs
Parental Permission Form**

As a participant in an afterschool program, your child will be asked to complete an online questionnaire.

This survey is **voluntary**.

Information gathered from this survey is used to ensure programs like Love for Art can continue to be offered in the future.

The survey will take about 15 minutes to complete.

The questionnaires include questions about:

- Their name, birthday and gender
- Quality of the afterschool program
- Your child's attitudes and interests
- Outcomes associated with participating in the afterschool program

The information is password protected. Your child will never be identified in any reported findings or evaluation reports.

If you have any questions about this evaluation please contact:

Dr. Cori Groth, Associate Director, UEPC, 801-581-5177

I confirm that I have read this parental permission document and agree to allow my child to participate in this evaluation of afterschool programs.

Student's Name: _____

Parent/Guardian's Printed Name: _____

Relationship to Student _____

Signature: _____ Date: _____