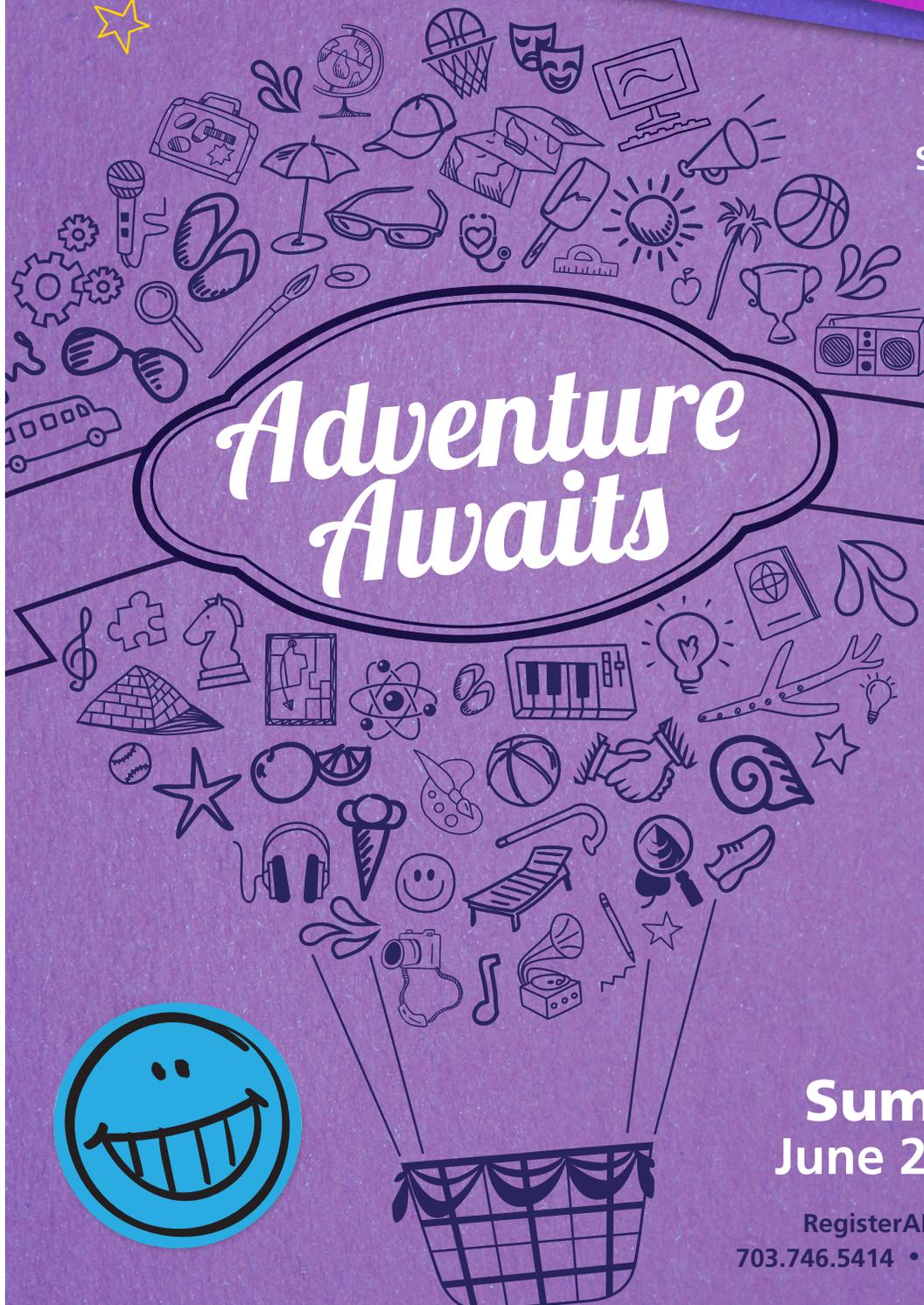




Department of Recreation, Parks & Cultural Activities presents

OUT OF

SCHOOL TIME



# Adventure Awaits

Summer fun for ages 6-14.

Discover new interests,  
explore unseen sights,  
and make every day  
an adventure!



Summer 2016  
June 27 - August 19

RegisterARPCA@alexandriava.gov  
703.746.5414 • alexandriava.gov/Recreation





CITY OF ALEXANDRIA  
Department of Recreation, Parks & Cultural Activities  
Recreation Services Division

2016 Summer Out of School Time Program



Dear Parents and Participants:

Welcome to another summer of fun and educational activities for children in the Out of School Time Summer Power-On and Power-Up Programs. Participants are placed into groups based on age. Throughout the program there will be leaders with each group to successfully rotate through activities scheduled in creative and performing arts, fine arts, sports, fitness and health, education and leisure, field trips and family events.

This year’s theme is Your Adventure Awaits! This theme invites your child to make every day an adventure with the Power-On and Power-Up Summer Out of School Time Program. Journey with us as we discover new interests, explore unseen sights, and make the impossible, possible. They can come along and discover what adventure is awaiting.

The summer program hours are Monday through Friday from 9 a.m. to 5 p.m. and all participants are required to be picked up no later than 6 p.m. All locations are closed on Monday, July 4. Children enrolled in Power-On are expected to sign “in” upon arriving and be signed “out” by a parent or authorized adult when leaving the recreation center. Lunch and snacks are provided by the USDA Summer Food Service Program on a daily basis.

Recreation program applications and parent information packets are available for pick up at your neighborhood center or register online. Registrations are processed on a first-come, first-served basis. Registration begins on February 24. There is an activity fee of \$300 per child due at the time of registration. Payment made by check or money order should be made payable to the City of Alexandria. Financial assistance and payment plans are available for qualified families. For more information, please contact the Registration and Reservations Office at 703.746.5414. It is important to register as early as possible. We look forward to meeting with parents and children at one of our parent orientation meetings. Contact your neighborhood recreation center for the time and dates. A Spanish translator may be present at the meeting to assist with answering questions if needed.

Please remember that in order for your child to participate in our program, you must be a resident of the City of Alexandria. You are required to provide two forms of identification to verify residency and complete all registration information forms before your child is able to attend the program.

The City of Alexandria is committed to compliance with the Americans with Disabilities Act, as amended. To request a reasonable accommodation, contact Jackie Person, Therapeutic Recreation Program Manager, at 703.746.5423 (VA Relay 711) or jackie.person@alexandriava.gov.

Power-On and the Power-Up Program are not licensed child care programs but are based on local standards approved by the City Attorney and available online at alexandriava.gov/Recreation.

**The Power-On program is offered at the locations listed below:**

Charles Barrett Recreation Center	1115 Martha Custis Dr.	703.746.5551
Charles Houston Recreation Center	901 Wythe St.	703.746.5552
Cora Kelly Recreation Center	25 West Reed Ave.	703.746.5554
Mount Vernon Recreation Center	2701 Commonwealth Ave.	703.746.5556
Patrick Henry Recreation Center	4643 Taney Ave	703.746.5557
William Ramsay Recreation Center	5650 Sanger Ave	703.746.5558
John Adams School	5651 Rayburn Ave.	703.746.5414
Douglas MacArthur School	1101 Janneys Lane	703.746.5414
James K. Polk at Minnie Howard School	3801 West Braddock Road	703.746.5414

The Power-Up program is offered at George Washington Middle School, 1005 Mt. Vernon Avenue.



# SUMMER REGISTRATION 2016

DEPARTMENT OF RECREATION, PARKS & CULTURAL ACTIVITIES, 1108 Jefferson Street, Alexandria, Virginia 22314

## Choose Recreation Center Location:

- Charles Barrett     Charles Houston     Cora Kelly     Mount Vernon     Patrick Henry  
 William Ramsay     John Adams School     James K. Polk at Minnie Howard     Douglas MacArthur School  
 Power-Up at George Washington Middle School (Entering 6-10 Fall 2016)

## PLEASE PRINT

Name of Participant \_\_\_\_\_ Birth Date \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ School \_\_\_\_\_ Fall Grade Level (2016-17) \_\_\_\_\_

## PARENT/GUARDIAN INFORMATION:

Mother's Name \_\_\_\_\_ M Work # (    ) \_\_\_\_\_ M Cell # (    ) \_\_\_\_\_

Father's Name \_\_\_\_\_ F Work # (    ) \_\_\_\_\_ F Cell # (    ) \_\_\_\_\_

Email address: \_\_\_\_\_

Mother's Work Location \_\_\_\_\_ Father's Work Location \_\_\_\_\_

Mother's Work Address \_\_\_\_\_ Father's Work Address \_\_\_\_\_

Emergency Contact #1\* \_\_\_\_\_ Phone # (    ) \_\_\_\_\_ Cell (    ) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Emergency Contact #2\* \_\_\_\_\_ Phone # (    ) \_\_\_\_\_ Cell (    ) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

\*Emergency Contacts must be someone other than the parents and available during program hours.

## My child will regularly arrive/leave the Center by way of (Check box):

- Walk (Power-On participants in grade level 4 or above with written permission)     Parent     Car Pool     Other \_\_\_\_\_

## Person(s), other than parents, authorized to pick up child:

Name # 1 \_\_\_\_\_ Phone # (    ) \_\_\_\_\_ Cell (    ) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name # 2 \_\_\_\_\_ Phone # (    ) \_\_\_\_\_ Cell (    ) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

If a parent or other adult is NOT allowed to pick up the child, attach a copy of applicable paperwork such as custody papers.

-----Office Use Only-----

Summer 2016 Fee: \$300 credit card \_\_\_ cash \$ \_\_\_\_\_ Check # \_\_\_\_\_ Money Order \_\_\_\_\_ ID \_\_\_\_\_ Staff \_\_\_\_\_ 3

**MEDICAL/SOCIAL INFORMATION** NAME OF PARTICIPANT \_\_\_\_\_

Trips to city pools and some local water parks are scheduled on a regular basis. What is your child’s swimming ability?  
\_\_\_ no swim experience \_\_\_ beginner \_\_\_ can swim length of pool

Does your child have medical conditions we need to be aware of, such as allergies or intolerance to foods, medications?  
\_\_\_ Yes \_\_\_ No if the answer is “yes”, please explain/describe medical condition:

Please describe action to be taken in an emergency:

Does your child have recent operations or any other pertinent medical information that might require special attention?  
\_\_\_ Yes \_\_\_ No if the answer is “yes”, please explain:

List prescribed medications your child takes and what the medications are treatment for. NOTE: Recreation staff are NOT authorized to administer medication. This information may be needed in case of a medical emergency that requires treatment.

Medication your child takes:	Medication for treatment of:

Please list any social or behavioral challenges for your child that you believe staff should be aware of:

Please list any accommodations needed:

The City of Alexandria is committed to compliance with the Americans with Disabilities Act, as amended. To request a reasonable accommodation, contact Jackie Person, Therapeutic Recreation Program Manager, at 703.746.5423 (VA Relay 711) or jackie.person@alexandriava.gov.

Name of Participant’s Physician \_\_\_\_\_ Phone # \_\_\_\_\_

Parent/Guardian Insurance Information:  
Company \_\_\_\_\_ Policy # \_\_\_\_\_

Note: The City of Alexandria does not provide medical insurance for your child. In the event of illness or injury requiring treatment, hospitalization, and/or surgery, the family medical insurance must be used.

**EMERGENCY TREATMENT STATEMENT & HOLD HARMLESS AGREEMENT**

I give the Department of Recreation, Parks and Cultural Activities, Recreation Services Division, permission to acquire emergency treatment at my expense for the participant named above. In consideration of the City of Alexandria, Department of Recreation, Parks and Cultural Activities, conducting various programs, the undersigned realizing the risk of injury attendant to such programs, does hereby and forever discharge the City of Alexandria, Department of Recreation, Parks and Cultural Activities and its officers, agents and employees from any and all action, claims or liability resulting from or arising out of or based upon any bodily injury or property damage which may be sustained by the undersigned or the undersigned’s child while participating in such programs.

SIGNATURE REQUIRED OF PARENT/GUARDIAN \_\_\_\_\_ Date \_\_\_\_\_

# SUMMER 2016 RULES AND REQUIREMENTS



NAME OF PARTICIPANT \_\_\_\_\_

In order for your child to participate in the 2016 Summer Program, you must understand and comply with all of the following rules and requirements.

*“Parent” also refers to a legal guardian.*

## **POWER-ON and POWER-UP PROGRAMS:**

- Must be a current resident of the City of Alexandria. Parents must provide two forms of identification to verify address.
- Parent must complete a 2016 Summer Program registration packet providing all information requested on the forms and pay the \$300 activity fee.
- Prior to participation on a field trip, the parent/guardian must fill out and sign a permission slip authorizing their child’s participation and pay the required fee.
- Programs offered at the recreation centers are not licensed child care programs but are based on local standards. Each Center’s program is planned to be age appropriate and properly supervised. Standards of care may be viewed at [alexandriava.gov/Recreation](http://alexandriava.gov/Recreation).
- I give the Department of Recreation, Parks and Cultural Activities, Recreation Services Division, permission to acquire emergency treatment, at my expense, for my child.
- I give permission for my child to participate in activities, discussion groups and personal development activities led by professionals as part of the program.
- I consent to the City of Alexandria’s use of photographs, film or video which includes my child in activities sponsored by RPCA for use in marketing or promotional material.
- I understand that children are expected to respect center staff, program participants, equipment, supplies and facilities. Inappropriate behavior, abusive language, physical altercations, destruction of property, possession of weapons or other unlawful items and other serious offenses will NOT be tolerated and will require disciplinary action up to and including suspension from the program. Staff will make every effort to work with parents to assist youth with behavior issues affecting their participation in the program.

## **POWER-ON PROGRAM:**

- Participants enrolled in Power-On are expected to sign themselves in and be signed out by a parent or authorized adult daily. Although youth in grades 4 or above may be given written permission by a parent to leave the center on their own, it is preferred that children stay throughout the program, 9 a.m. - 5 p.m. Parents are responsible to pick youth up by 6 p.m.

## **POWER-UP PROGRAM:**

- Youth may participate in Power-Up Program on a voluntary basis. They are expected to sign-in and out daily; however, they are not required to attend, and they may leave the program at any time. Once youth sign out for the afternoon, they may not return that day and must leave school property. Please be certain that your child understands your attendance expectations.

I have read, understand, and agree to abide by the above rules and requirements:

SIGNATURE OF PARENT/GUARDIAN \_\_\_\_\_

DATE SIGNED \_\_\_\_\_

SIGNATURE OF POWER-UP PARTICIPANT \_\_\_\_\_

DATE SIGNED \_\_\_\_\_

# FINANCIAL ASSISTANCE APPLICATION

DEPARTMENT OF RECREATION, PARKS & CULTURAL ACTIVITIES, 1108 Jefferson Street, Alexandria, Virginia 22314

To be considered for assistance, you must complete the entire application form and return it, with supporting documentation, to the Department of Recreation, Parks and Cultural Activities. If the request is for a class or camp, return with completed registration forms to the Lee Center, Registration & Reservation Office, 1108 Jefferson St, Alexandria, VA 22314 or fax to 703.746.5585. Applicants must demonstrate need in order to receive assistance. If you have questions about this form, please call 703.746.5414 or visit our office.

FORMS MUST BE RECEIVED AT LEAST 2 WEEKS PRIOR TO THE START OF THE PROGRAM. INCOMPLETE FORMS WILL BE RETURNED.

Participant's Name \_\_\_\_\_

Parent/Guardian's Name \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone: (H) \_\_\_\_\_ (W) \_\_\_\_\_

Explain the reason for your request (attach additional sheet if necessary) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Program Cost: \$ \_\_\_\_\_ Program Name: \_\_\_\_\_

Amount you could contribute \$ \_\_\_\_\_ Amount of assistance requested \$ \_\_\_\_\_

In return for assistance offered to you through our agency, please check the box to indicate if you are able to volunteer in some capacity.  I can volunteer  I cannot volunteer. If you check that you can, please indicate how:

\_\_\_\_\_

\_\_\_\_\_

Do you qualify for free/reduced school meals?  Yes  No If yes, please attach documentation.

Do you receive SNAP?  Yes  No If yes, case number: \_\_\_\_\_ attach documentation

Do you receive TANF?  Yes  No If yes, case number: \_\_\_\_\_ attach documentation

(See fee chart on page 8)

Signature \_\_\_\_\_ Date \_\_\_\_\_

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## For Office Use Only

Approved  Denied Amount of assistance: % \_\_\_\_\_ \$ \_\_\_\_\_ Amount required to pay \$ \_\_\_\_\_

Comments:

Signature of Supervisor \_\_\_\_\_ Date \_\_\_\_\_

Signature of Director/Designee \_\_\_\_\_ Date \_\_\_\_\_

## SUMMER 2016 Fee: \$300/child

Please visit [alexandriava.gov/Recreation](http://alexandriava.gov/Recreation) to view a full version of Out of School Time Program Standards.

*"Parent" also refers to a legal guardian.*

### Age of Participants

**Power-On Program** - Entering grades 1-6 in Fall 2016

**Power-Up Program** - Entering grades 6-10 in Fall 2016

### Ratios

The ratio of staff to registered participants is as follows:

Grades K-1 (Ages 5-6) is 1:20

Grades 2-6 (Ages 7-12) is 1:25

### Hours of Operation

9 a.m.-5 p.m. are program hours. Pick-up is required by 6 p.m. Before Care is offered at \$39 per week at locations that meet minimum enrollment. All sites are closed on Monday, July 4.

### Payments and Refund Policy

Any unpaid balances on RPCA accounts must be cleared in order for your family members to register in any other RPCA sponsored activities.

No refunds for the summer Power-On or Power-Up Programs will be processed after June 27. Requests made after this date due to extenuating circumstances will be decided on a case by case basis by the Division Chief of Recreation Services.

### Sign In & End of Day Pick-Up Time

Participants check in via signature or swipe card. Power-On participants are expected to sign in and be signed out by a parent or authorized adult daily. Parents should make arrangements to pick up children on time at the end of the day. Please inform staff and family members of all persons authorized to pick up your child.

**Late Fee** Parents will be assessed a late fee when arriving after 6 p.m. to pick-up their children. After a warning for making a late pick-up, the next late pick-up will result in the assessment of a late fee of \$5 for every 10 minutes late. This fee must be paid at the time of the infraction or it will be placed on the family's RPCA account balance.

### Attendance & Updating Information

Parents are asked to notify the staff if a participant is going to be absent or on vacation. Registered participants are expected to attend the program on a regular basis. Continuous lack of attendance may result in the child being classified as inactive. Once inactive, parents must request reinstatement in the program contingent on available space.

Parents must update their personal information when their address or telephone number changes. When information is not current staff may be unable to contact a parent in case of emergency.

### Proper Attire

Children should wear comfortable clothing that can be worn during active play. Children should wear sneakers, not sandals. Label the child's clothes and belongings with the child's name.

### Illness & Injuries

Participants who are running a fever, vomiting or complaining of pain or other symptoms will not be allowed to attend the program. If a participant becomes ill during program hours, parents must make arrangements for the participant to be picked up as soon as possible. An ill child will be separated from their group until parents arrive.

When a participant is severely injured or ill (when more than simple first aid is needed) staff attempt to contact a parent first or at least one person on the emergency contact list if a parent cannot be reached. If warranted, staff will call emergency services to attend to the injured/ill child. The City does not provide medical insurance for participants. In the event of an illness or injury requiring treatment, hospitalization, and/or surgery, the family's medical insurance must be used.

### Medications

Staff are not permitted to administer medication. If your child needs medication during the time period that he/she attends the program, the parent must arrange to bring and administer the medication to their child. If the child is required to have medication with them in case of emergencies (i.e. inhalers, epi-pen), the child may have it at the recreation program in a personal backpack or bag that is labeled. The medication must be labeled as well. Backpacks will be stored in an appropriate area of the center and be accessible if needed. Staff should be aware of any health concerns and the information must be noted on the child's registration form.

### Discipline

Discipline shall be constructive in nature to include using limits that are fair, consistent and appropriate; to provide reasons for limits; and to use positive word directions. No child will be forced to assume an uncomfortable position; be restricted in movement; be enclosed in a confined space; or be assigned exercise.

In the best interest of the program and its participants, staff members reserve the right to enforce restrictive actions on a participant who is causing a disturbance in the program. Restrictive action may include meetings with parents, temporary exclusion from activities, or suspension from current and/or subsequent programs. In severe cases, there may be cause to suspend privileges. For a suspension period of more than three days, the parent will receive notification by the Deputy Director of Recreation Services regarding the status of their child in all city recreation programs.

Failure to abide by prescribed restriction on the part of the participant will result in progressive restrictions up to and including suspension of all recreation privileges.

### Field Trips

Field trips are typically scheduled during program hours. Transportation will be provided by Alexandria City Public School buses or City vehicles to and from field trip locations. All vehicles used for the purpose of transportation meet the safety standards set by the Department of Motor Vehicles and are kept in satisfactory condition to assure the safety of children. Participants will NOT be transported in staff owned vehicles. When necessary, participants will cross streets with staff at corners and crosswalks or other designated safe crossing points. Participants who do not have a signed permission slip or have not paid the fee by the required date will not be allowed to attend the trip.

### Financial Assistance Procedures

To be considered for assistance, the entire Financial Assistance Application form must be completed and returned, with supporting documentation and a completed registration form, to your chosen location or the Lee Center, Registration & Reservation Office, 1108 Jefferson St, Alexandria, VA 22314.

Applicants must demonstrate need in order to receive assistance, including: free/reduced school meals letter, SNAP documentation, or TANF documentation.

Staff will confirm the payment amount with the applicant based on the documentation provided as above.

Any request for fee assistance without the stated documentation or at a level above and beyond the established discount must include an explanation and be approved at the Division Chief level. This process takes additional time and registration in the program will be delayed until approval has been secured.

For more information please call 703.746.5414.

	Program Cost	% Discount	Discount	Payment Due
Free or Reduced Lunch	\$300	40%	\$120	\$180
SNAP	\$300	50%	\$150	\$150
TANF	\$300	70%	\$210	\$90

### Fee-Based Programs

In the event that the Center offers an opportunity for participation in a fee-based class or other enrichment program, all fees must be paid prior to attendance in such programs.

### Snacks/Meals

A healthy lunch and snack is provided daily to the participants attending the Power-On and Power-Up programs at qualified sites. All food meets the USDA recommended guidelines. A menu is available to all participants and posted at the Center for parents to see. Participants with food allergies must notify staff and may need to make arrangements to bring a meal on days when they cannot eat the meal provided. At no time will children be forced to eat a meal.

Children will not be permitted to access centers' vending machines without a parent or guardian present.

### Special Activities

Occasionally, the program will host activities with other agencies and organizations in a special program or activity for the registered participants. In this situation, a permission slip may be required. If a signed permission slip is not returned, the participant is not eligible to participate in the special activity.

### Toys, Games, Cell Phones & Personal Belongings

Program participants are prohibited from bringing illegal, unauthorized or contraband materials, toys, electronic devices, or other personal property which might affect the health, safety and welfare of all persons at a City facility or that disrupt planned activities. A child may bring a cell phone to the program. However, the cell phone will be kept in the child's back pack and be turned off during program hours and may only be used with the express permission of City staff.

The City and its employees are not responsible for any participant's lost, stolen or damaged personal items.

The City and recreation program staff respect the privacy of all program participants; however, City employees may search any participant in the program, the participant's personal property, or both when there is reasonable suspicion to believe that the participant possesses an item that violates the law or City policies and regulations. City staff may seize any illegal or unauthorized personal property discovered in any search. Parents will be notified when a child's property is searched or seized by staff.

### Suspected Child Abuse

Unusual marks or bruises that appear on a child's body, inappropriate behavior and/or evidence of any type of abuse or neglect will be noted in an incident report and will be reported to the Program Director. The Program Director will report this information to the Department of Community and Human Services Child Protective Services Division and provide all information needed to enable a social worker to investigate the matter.

### ADA Accommodations

The City is committed to compliance with the Americans with Disabilities Act, as amended. To request a reasonable accommodation, contact the Therapeutic Recreation office at 703.746.5423.

### Checklist of information needed for registration:

- Completed/signed registration forms
- Copy of child's "Proof of Identity" (birth certificate, passport, or other official document) for viewing purposes only
- 2 forms of proof of City residency (1 photo ID)