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	GPDPT	
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\geq	Child's Name	Male	Female		
— О Е	Birth Date (MM/DD/YYYY)	Age			
4.5	Address				
-	Dity				
_	Home phone				Place Current
	Email Address:			•	Photo Here or
– .	IDENTIFICATION WILL BE REQUIRED WHEN PICKII			•	E-Mail Picture to
¥ E	Parent/Guardian (1st contact)			-	L-Mail Fictore 10
~ [Day phone			•	mwozniak@cityofvista.com
O F	Parent/Guardian (2nd contact)				
<u>"</u> [Day phone				
A E	RELEASE AUTHORIZATION (persons other than pare	ents)			
<u>⊢</u> N	Name (3rd contact)			Phone	
S I	Name (4th contact)			Phone	
_ > <u>F</u>	HEALTH & SAFETY INFORMATION				
(O Medical Conditions/Accommodation:				
(O Allergies:				
(O Staff may apply sunscreen to my child as the nee	ed arise	S.		
(Custody Agreement (If yes, a copy of the agreement	must be	kept on fil	le with the Pre	eschool Program Office.)
1	MPORTANT PROGRAM INFORMATION *More inform	nation c	n reverse	<u>*</u>	
1	Potty-Trained - NO EXCEPTIONS! The child must be complete Exceptions. Age Requirements: Child must be the age listed for the phe Vista Unified School District guidelines for entering Kifield Trips: Throughout the school year we will be taking one child & one adult (additional siblings/adults will costrip & Sea World. A parent/guardian is required to attendocation the day of the trip. Classes will be combined on tomack: Each child will be assigned at least one day during on the snack list. It is very important that you note the day or the day. You will need to provide enough for the entire Close-Toed Shoes: Children must wear appropriate footwordect their feet and avoid any unnecessary accidents. Sunscreen: Please put sunscreen on the child before consexposure. Sunscreen is NOT provided by the program. If give us permission to help put it on. Photo / Video Exclusion: By registering for a City program or marketing and program information material. Please Photo / Video Exclusion under the Policies (page 2) of the Refund Policy: Prior to the start of the final day of the session, participants moral less the pro-rated daily rate, based on the number of day refunds are assessed a processing fee of 25% of the registration of the start of the final day of the session, participants moral less the pro-rated daily rate, based on the number of day refunds are assessed a processing fee of 25% of the registration of the start of the final day of the session, participants moral less the pro-rated daily rate, based on the number of day refunds are assessed a processing fee of 25% of the registration of the start of the final day of the session, participants moral less the pro-rated daily rate, based on the number of day refunds are assessed a processing fee of 25% of the registration of the start of the final day of the session, participants moral less the pro-rated daily rate, based on the number of day refunds are assessed a processing fee of 25% of the registration of the start of the final day of the session of the reg	rogram in indergant g a total of a total of the set and the set an	n order to be en. of 3 field to The location is and will rur ssion that will in the second must be the means release. They not to send the giving the ere if you cation Form to the arefund of the second must be the second must be the second must be the dor credit be the second must be the second m	pegin. No excurips. Cost of tons will be Bas not provided from 10:00a they are responded because brought with no flip flops of the child with the City permiss do NOT give under the child with the child with the City permiss of attendance of the child with the child with the City permiss of attendance of the request is made prior to the contacting Permission of t	eptions will be made. This is based on the trips will be no more than \$15 for ates Nut Farm, Polar Express Sprinter by the program. We will meet at the am to 1:00pm. Consible to bring the ingredients listed it is incorporated into the lesson plant the student. The sandals. It needs to be close-toed to the playground which is limited sunt sunscreen, you can check above to sion to use your child's photos/videos as permission. You must also sign the mount of the refund/credit will be the feet, and the processing fee for refunds. All immediately after the issue date of credit. To hold a spot for future programs are nonserceived before the program begins. If a the start of the event. If you are unable to gagy Kidd Wozniak at 760-643-5272.
	Parent/Guardian Signature				te
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~PLEASE SEE REVERSE FOR WAIVER INFORMATION~ MUST BE SIGNED & INITIALED IN HIGHLIGHTED AREAS These policies shall be considered in their entirety and may not be modified, altered, or changed in any form without the express written consent of the City of Vista. Attendance and participation in the Early Childhood Education (E.C.E.) Program is contingent upon agreement to all of the conditions set forthwith.

Class Philosophy

The City of Vista Early Childhood Education Program is committed to a simple yet comprehensive philosophy focused on your child's wellbeing: be safe, build positive relationships and make it fun. This philosophy is the basis in which our program operates, staff are trained and activities are developed. This program is curriculum based, not play based.

Dress Code

Students should wear comfortable clothes that will allow them free range of motion to participate in recreational and athletic activities. Clothes may get soiled with dirt, grass, paint, glue, etc. Unacceptable Attire: sandals, flip-flops, open-toed shoes, revealing clothing, apparel that displays/promotes drugs, alcohol, tobacco, or gang references and excessively loose or baggy pants.

Fully Potty-Trained - No EXCEPTIONS

Students must be full potty-trained in order to participate in the program. This includes NO pull-ups. The facility provides the students with a restroom dedicated to the preschool program. This restroom is only open to the preschoolers, no public or adults are allowed to use it.

No Personal Items/Electronic Devices

Students are <u>NOT</u> permitted to bring any personal items from home. This often increases the likelihood of them getting lost, stolen or damaged. In addition, students shall not borrow, lend or trade items while at school. The staff reserves the right to confiscate any and all personal items as issues arise. Confiscated items will be returned to the parent at the end of the day.

Lost Items

The City of Vista is <u>NOT</u> responsible for any personal items that may have been lost, stolen or gone missing during the program.

Snack

Each child will be assigned at least one day/session they are responsible for snack. It is very important that snack arrive with the student. That is when the teacher has the opportunity to get it set up. A snack list will be e-mailed prior to each session.

Field Trips/Transportation

Field Trips are an additional cost with the Early Childhood Education program. The cost is minimal but they are not included in the cost of the program. The 3 locations we go to are Bates Nut Farm, Polar Express Sprinter Trip and Sea World. Once the field trip is booked we will provide parents with the information. Payments must be made in cash directly to the office. The teacher DOES NOT take any type of payments. The office will provide you with a receipt for the transaction and any additional paperwork / information you may need. Transportation is provided by the parent and parent/guardian must attend.

Photography Wavier

I permit the City of Vista to use and publish photographs and/or videotapes of me, my child or my ward for purposes of promoting recreation activities to the community through any media channels. To exclude your child from being used in marketing material (photos or videos) you must sign here and initial on the first page.

Late Pick-up

Students that are picked up late from class are subject to late fees. Fees are as follows: 1-5 minutes, \$5; 6+ minutes, \$1 per minute. Late fees shall be collected at the time of pick up and are per child. Child protective services may be notified if students remain more than an hour without contact from the parent. Habitual tardiness could result in dismissal from the program.

Consent to Treat Minor

In the event of sudden illness, accident or injury which may occur while said minor is engaged in an activity supervised by City of Vista employees, when neither of the parents or guardians can be contacted, I hereby give my consent for emergency medical treatment as shall be necessary under the circumstances by any physician licensed under the laws of the State of California. I further understand that I shall be solely responsible for all costs associated with the emergency medical treatment provided.

Transfer Requests

The City of Vista E.C.E. will honor transfer requests provided the session requested is available and is an appropriate age group. Children must meet the age requirements in order to participate in the program.

Refund Policy

Prior to the start of the final day of the session participants may request a refund or credit. The amount of the refund/credit will be the daily prorated fee, based on the number of days elapsed, regardless of attendance, and the processing fee for refunds. Preschool refunds/credits are based on a pro-rated amount. All refunds are assessed a processing fee of 25% of the session fee. All credits expire on July $1^{\rm st}$ immediately after the issue date of credit. Deposit are non-transferable and non-refundable. If you should have any questions please contact Peggy Kidd at $(760)\,643\text{-}5272$

Early Childhood Education (E.C.E.) Policies

I agree to comply with all the rules and regulations of the City of Vista, Recreation & Community Services Department regarding all program fees, enrollment guidelines, schedule of events, and other policies specified in the Parent's Handbook issued by the Early Childhood Education Program. I understand and agree that the City of Vista, a chartered municipal corporation will not assume responsibility for a child who has not been properly signed in when he/she arrives for the day or signed out when he/she leaves for the day.

Early Childhood Education (E.C.E.) Parent Handbook

The City of Vista Day E.C.E. Program makes available the Parent Handbook that includes program information, policies and procedures. Please contact the Office to request a copy. If you would like clarification on anything herein, contact the office at 760-643-5272.

Communication

All communication will be handled through the office. The students are not allowed to call the parents directly, the staff will be the point of contact.

Student's Name	(please print)
Parent/Guardian Name	/
Parent/Guardian Signature	Date
OFFICE USE ONLY ☐ Program Policies Sessions: ☐ 1 ☐ 2 ☐ 3	□ Excel Registration (staff) □ Additional Waiver (MUST HAVE!) □ 4 □ 5 □ 6 (1st in full / \$10 deposits for additional sessions)

CITY OF VISTA RECRATIONAL PARTICIPANT EXPRESS ASSUMPTION OF THE RISK, RELEASE, WAIVER AND INDEMNITY AGREEMENT

PROGRAM: 24/25 Early Childhood Ed. (Smart Start / Ready Set Learn)

No PARTICIPANT may participate with the Program unless and until this form is initialed & signed by the PARTICIPANT (or the PARTICPANT's parent/legal guardian if applicable)

EXPRESS ASSUMPTION OF THE RISK

Recreational sports and activities *INVOLVE INHERENT RISKS OF INJURY, DEATH OR PROPERTY DAMAGE* that no amount of care, caution, instruction, or expertise can eliminate. Participation in recreational sports and activities *ALSO EXPOSES ONE TO ADDITIONAL RISKS*, whether inherent or not, caused by things such as conditions of property, equipment provided or conduct of others, including other participants, spectators, or employees/agents/independent contractors of the City of Vista. These risks can be encountered whether or not actually participating in the recreational sport or activity. *PARTICIPANT FREELY ASSUMES ALL RISKS WHETHER OR NOT SPECIFICALLY DELINEATED.* (Initial)

RELEASE AD WAIVER OF LIABILITY

In consideration for permission to participate in the program, the undersigned agrees to FOREVER RELEASE, DISCHARGE, AND WAIVE ANY AND ALL LIABILITY CLAIMS OR DEMANDS AGAINST THE CITY OF VISTA or their employees/agents/independent contractors/volunteers ("Releasees") that the UNDERSIGNED, HIS OR HER PERSONAL REPRESENTATIVE(S), SUCCESSOR(S) IN INTEREST, ASSIGN(S), HEIR(S), OR DEPENDENT(S) has or might have against Releasees, whether or not caused by the negligence of Releasees or any other person or entity, arising out of participation in the program. (Initial)

INDEMNITY

In consideration for permission to participate in the program, the UNDERSIGNED, HIS OR HER PERSONAL REPRESENTATIVE(S), SUCCESSOR(S) IN INTEREST, ASSIGN(S), HEIR(S), or DEPENDANT(S) AGREE TO INDEMNIFY, HOLD HARMLESS AND DEFEND Releasees from any legal obligation or liability, whether or not caused by the negligence of Releasees or any other person or entity, arising out of participation in the program. The duty to defend exists independently of any duty to indemnify. (Initial)

ACKNOWLEDGEMENT

By signing the *THIS EXPRESS ASSUMPTION OF THE RISK, RELEASE, WAIVER, AND INDEMNITY AGREEMENT* ("AGREEMENT"), the undersigned acknowledge(s) that: (1) participation in recreational sports and activities is voluntary and does not involve public interests; (2) that the *AGREEMENT* has been read and understood; and (3) that the *AGREEMENT is a contract that EXTINGUISHES CERTAIN LEGAL RIGHTS AND IMPOSES*OTHER LEGAL OBLIGATIONS. Failure to initial where indicated above does not invalidate the *AGREEMENT*. Additionally, if the Participant is a minor his or her custodial parent or legal guardian must read and execute this *AGREEMENT* and by signing agrees to be bound by the *AGREEMENT* and agrees to bind the minor to the *AGREEMENT*

AGNELVIEW.	
Participant's Name (Print)	
Parent/Legal Guardian Name (Print):	
Relation	
By signing you are agreeing to the waiver, program information and refund policy.	
Signature of Parent/Legal Guardian:	
Date:	