

Consents/Signatures

I/WE UNDERSTAND that violation of the stated rules of the ZSEP Code of Conducts and Safety Procedures can result in the participant's expulsion from the program.

I DO NOT give permission for my child to leave Zion Baptist Church UNACCOMPANIED to walk home at the end of the ZSEP program day.

I GIVE PERMISSION for my child to leave Zion Baptist Church UNACCOMPANIED to walk home at the end of the ZSEP program day. I understand that she/he will LEAVE THE CHURCH BETWEEN 4PM AND 4:15PM daily. If there is a change in the time (either an earlier release or later release), the Director will contact me at the earliest possible time.

I DO GRANT permission for a photo/video image that includes my child(ren) and/or myself WITHOUT any other personal identifiers to be used for the purpose of publicity, advertising, and promotion.

I DO NOT GRANT permission for a photo/video image that includes my child(ren) and/or myself to be used for the purpose of publicity, advertising, and promotion.

The following person(s) are NEVER allowed to pick up my child at any time. If they attempt to do so, notify me immediately

Name: _____ Relationship: _____

Name: _____ Relationship: _____

I/We have read, understood, and accepted the terms stated in the ZSEP Code of Conduct, Safety Procedures, and the Parental Consent/Liability/Medical Release...

Parent Name (Print): _____

Signature: _____

Date Signed: _____

ZSEP Parental Consent/ Liability/Medical Release

This consent form gives permission to seek whatever medical attention is deemed necessary, and releases the **Zion Summer Enrichment Program** (hereafter called **ZSEP**), its employees, agents, and volunteers of any liability against personal losses of named child, I have legal custody of the student named below, and have given my consent for him/her to participate in activities being organized by **ZSEP**.

I give permission for my child to be transported by private and/or commercially owned vehicles. I also release **ZSEP**, its employees, agents, and volunteers from any and all liability for any injury, loss, or damage to person or property that may occur during the course of my child's involvement.

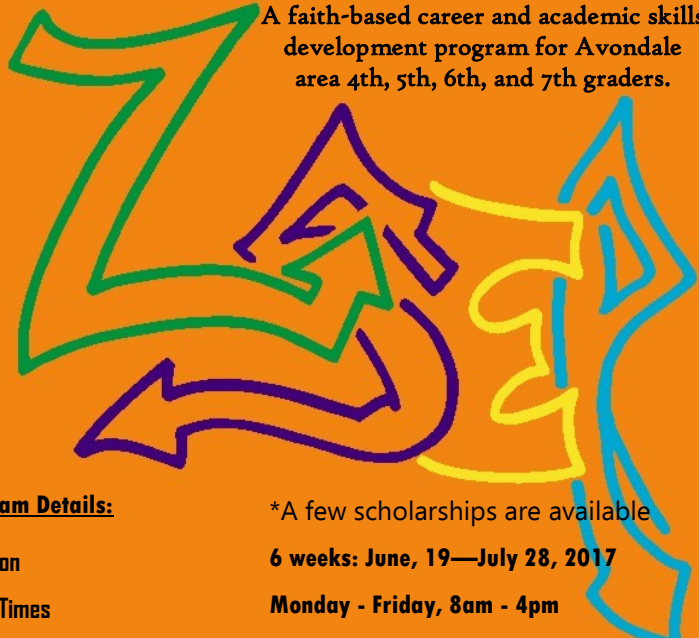
I give the employees and/or representatives of **ZSEP** permission to authorize emergency medical and dental treatment for my child. In the event that he/she is injured and requires the attention of a doctor, I consent to any reasonable medical treatment as deemed necessary by a licensed physician.

In the event treatment is required from a physician and/or hospital personnel designated by **ZSEP**, I agree to hold such person free and harmless of any claims, demands, or suits for damages arising from the giving of such consent. I also acknowledge that I will be ultimately responsible for the cost of any medical care should the cost of that medical care not be reimbursed by the health insurance provider.

Parent Initials: _____

Zion Summer Enrichment Program (ZSEP)

Mrs. Robin Whittle, Program Coordinator / Reverend James H. Cantrell, Pastor



A faith-based career and academic skills development program for Avondale area 4th, 5th, 6th, and 7th graders.

Program Details:	*A few scholarships are available
Duration	6 weeks: June, 19—July 28, 2017
Days/Times	Monday - Friday, 8am - 4pm
*Cost (includes breakfast & lunch)	\$125/child; \$50 per additional child

Dear Parent,
We want your child/children to have their best experience with us and we need your help in doing that. Please be mindful of the following and discuss with your child.....

- Code of Conduct
- Parental Consent/Liability/Medical
- Consent to Leave/Authorized Pickup
- Photo Permission

ZION BAPTIST CHURCH

* 630 Glenwood Ave. * P.O. Box 29071 * Cinti., Ohio 45229-0071

Phone: 513-751-8608 * Fax: 513-751-0389 * Email: zbaptist@fuse.net

Mrs. Robin Whittle, Program Coordinator * Reverend James H. Cantrell, Pastor

Partially Funded By:



Zion Summer Enrichment Program (ZSEP)

A faith-based career and academic skills development program for Avondale area 4th, 5th, 6th, and 7th graders.



ZSEP Code of Conduct

As a participant in the Zion Summer Enrichment Program and his/her legal guardian, we agree to:

- **Attend the program faithfully.** If you know your child will miss more than seven days of the program between June 19 and July 28, you may want to rethink his/her participation.
- **Notify the director if your child will be absent.** Call no later than noon (12 pm) of the day before you expect your child to be out. If something unanticipated happens that morning that prevents his/her attendance (i.e., child's illness), call by 8:30 am.

NOTE: We order the next day's breakfast and lunch during the lunch period (for example, Tuesday's breakfast and lunch are ordered during Monday's lunch period). If your child is absent the next day, we will have ordered a meal for nothing and will be charged for a wasted meal.

- **Arrive at the church between 8 am – 9 am for breakfast.** Children cannot be brought before 8 am because there will be no one there to supervise them.
- **Have children gone from the church by 4:30 pm.** If you allow your child to walk home, s/he will be release between 4 and 4:15 pm. Otherwise, a responsible adult who you have authorized will have to pick him/her up no later than 4:30. If something unforeseen happens that prevents a timely pick up, call the director immediately. You may be subject to a \$5 per half hour fine and, if this is a repeated problem, expulsion from the program. Failure to pay within three calendar days will result in your child's being excluded until the fine is paid.
- **Stay for the full program day.** If your child needs to leave before the days ends, contact the director to make arrangements.
- **Take the breakfast and lunch that has been ordered.** Unless you have made arrangements in advance, your child will be given breakfast and lunch each day whether he or she intends to eat it or not.
- **Dress appropriately.** Children should dress casually and comfortably but neatly, respectfully, and modestly in keeping with being in God's house...

The following are among items that will not be allowed: **pants/shorts with waist bands hanging or sagging below the hips (or show underwear/shorts), shirts that are excessively large or small, doo-rags and headscarves, clothing with inappropriate language or pictures, tops or bottoms that are too tight or revealing, and hats (males) inside the building.** Certain field trips may require different standards of dress; you will be notified in advance when that is the case.

- **Cooperate with program staff (paid and volunteer) and church staff**
- **Be respectful to adults and other children.** That includes not using profane or disrespectful language, keeping hands to one's self, refraining from gossiping and instigating conflict, not being intentionally hurtful or insulting to others, not stealing or destroying other's property, and complying with adult requests/directives
- **Bring concerns about the program to the director's attention in a timely manner.**

ZSEP reserves the right to dismiss a child from the remainder of the program who displays chronic, negative behavior that disrupts the educational goals of the program. Funds will not be refundable.

Parent Initials: _____

ZSEP Safety Procedures

Zion Summer Enrichment Program has established these safety procedures for all participants of the program.

Staff:

There will be 2-3 full time staff personnel from 8-4:30 for 6 weeks to supervise the children; 2 part time staff personnel daily for academic instruction in large or small group settings; and, at least 1-2 volunteers daily during academic instruction in large or small group settings. The children will be supervised at these times:

- ◇ Bathroom (one or more) and Instruction time
- ◇ Playground time (1-2 or more staff members or volunteers)
- ◇ Fellowship hall game time (1 or more staff/or volunteers)
- ◇ Field trips (3 or more adults with the children divided into groups to be chaperoned)

Parents:

- ◆ Provide phone numbers for home and emergency and Provide names and numbers of persons permitted to pick up children
- ◆ Other persons picking up children will provide picture ID
- ◆ Parents or permitted adults come in and sign the child (children) out unless the child has permission to walk home at the end of the program
- ◆ Written or phone in permission from parent for child to leave early if necessary.

We understand that violation of the stated rules of the ZSEP can result in the participant's expulsion from the program. Parent Initials: _____

Contact Information

I/We affirm that the contact and health insurance information provided below is accurate at this date and will, to the best of my knowledge still be in force for the student(s) named below.

Student #1 _____ D.O.B. _____
 AGE _____ SEX _____ Health Concerns _____
 _____ _____

Student #2 _____ D.O.B. _____
 AGE _____ SEX _____ Health Concerns _____
 _____ _____

Student #3 _____ D.O.B. _____
 AGE _____ SEX _____ Health Concerns _____
 _____ _____

PARENT CONTACT

Mother: _____ Cell: _____ Work: _____

Father: _____ Cell: _____ Work: _____

Guardian: _____ Cell: _____ Work: _____

EMERGENCY CONTACT: Mother Father Guardian Other

Other: _____ Cell: _____
 _____ Work: _____

PHYSICIAN/DENTIST INFORMATION

Physician _____ Phone: _____

Dentist _____ Phone: _____

Health Insurance Company _____ Phone: _____

AUTHORIZED PICK-UP: Mother Father Guardian Other

Other _____ Cell: _____ Relationship _____

Other: _____ Cell: _____ Relationship _____