



CHILD MEDICAL/EMERGENCY INFORMATION and RELEASE FORM

CHILD INFO

Name	Date of Birth	Grade	Name of School

MEDICAL CONDITIONS

List any medical conditions we should be aware of including illnesses, food allergies, special diets, diagnoses or any other information we should know about your child. You may continue on the back of this page.

PARENTAL CONSENT

As a parent or guardian of the participant enrolled in a Connect Us program, I understand that if my child requires medical treatment, the director or a staff member will immediately come get me out of parent workshop/program. If an emergency arises and I cannot be located, I give my consent to have Connect Us staff perform medical treatment for my child as needed. This includes my consent to have Connect Us transport my child to a licensed medical facility should my child's condition require it. I understand that in such a case, reasonable attempts would first be made to contact me or the contacts listed above if time and conditions permit. I have disclosed important information about my child's medical history and provided emergency contacts. I understand that each participant assumes all risks, consequences and potential liability. I hereby release and hold harmless the program site, director and staff members of Connect Us, its employees, volunteers and any other person, firm or corporation charged or chargeable with responsibility or liability from any and all claims by reason of accident, illness, injury, or other consequences arising from participation in a Connect Us program.

I grant permission for my child/children to:

- Participate in all sports and activities (*List any exceptions*): Yes No
- Eat snacks provided by Connect Us (*List any exceptions*): Yes No
- Be photographed and videotaped for our website, for staff training or marketing materials: Yes No

I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND THE CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY ON BEHALF OF MY CHILD AND I SIGN IT OF MY OWN FREE WILL.

PARENT/GUARDIAN SIGNATURE:

DATE:



Policies for Youth Programs

Drop Off & Pick Up

You may drop off your child any time after 8:45 a.m. The workshop will begin at 9:00. There will be no supervision for children prior to 8:45. Children will not be able to enter the workshop. We will take 10-15 breaks throughout the day and parents are welcome to visit their children during scheduled breaks. At 2:00, your children will be ready for pick up. Before the session begins, parents will receive an email with all the program details and important phone numbers to keep on hand.

Connect Us will not allow a child to leave the premises until they are released to parent/guardian. If someone other than parent/guardian attending workshop will be collecting child, that individual's name must be provided to Connect Us at drop-off.

Illness

Many of our games involve physical activity. Children who are not feeling well should not attend. If a child tells us they don't feel well, they will be required to sit out of games and parent/guardian will be asked to collect them.

Snacks

Snack n Chat is part of our social group's curriculum. Typical snacks include pretzels, fruit snacks, fresh fruit slices or muffins/bagels. If your child can only eat food you provide, please label those items with his or her name at drop-off.

Allergy Alert!

Nut allergy is a life-threatening condition, therefore, we do not provide snacks with peanut butter, nuts, or nut products and request that children do not bring these items either.

Cancellation Policy

If you've registered a child who ends up not attending, please let us know prior to workshop by emailing programs@connectusnow.org or calling 303-773-3960.

Safety and Behaviors

The safety of every Connect Us child is our top priority and our age-based group's model provides the structure and support many kids need to safely engage with their peers. We view every child as capable and have the same age-appropriate behavior expectations for every child. We'll guide and encourage them when they need help and regularly seek peer group's support. Connect Us programs are not designed for children who self-harm, are physically aggressive towards staff or adults or who may flee if they're not contained.

I acknowledge that I've read and understand the content above.

Parent/Guardian Signature

Date

PARENT QUESTIONNAIRE

We'd like to know a little bit about your child prior to the program. Please complete separate forms if you have more than one child attending.

Today's Date	Child's Name

1) Does your child have a diagnosis or any medical, behavior or communication difficulties?

2) What are your child's favorite activities or interests?

3) What are your child's greatest strengths?

4) What are your child's biggest challenges?

5) Rate each sentence below from 1 to 4 as it relates to your child during unstructured play time, such as during recess or on a public playground.

1 = Never

2 = Rarely

3 = Occasionally

4 = Frequently

- a. ___ Decides what he/she wants to play and recruits other kids to join in
- b. ___ Joins in a sport, activity or game regardless of who's playing
- c. ___ Seeks out specific friends to play with and plays whatever they are playing
- d. ___ Plays alone

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6) Using the same scale from question 4, please rate your child on the following:

1 = Never

2 = Rarely

3 = Occasionally

4 = Frequently

	1	2	3	4
a. Initiates social interaction, friendly	1	2	3	4
b. Maintains friendships	1	2	3	4
c. Cooperative, gets along with adults and peers	1	2	3	4
d. Flexible, adaptable, willing to try new things	1	2	3	4
e. Is resilient, regulates emotions, rebounds from disappointment and handle frustration	1	2	3	4
f. Self-confident, speaks positively about self and abilities	1	2	3	4
g. Demonstrates empathy and concern for others	1	2	3	4
h. Communicative, expresses thoughts and feelings	1	2	3	4
i. Encourages others, is supportive and helpful	1	2	3	4

Comments: