

Beyond the Bell is an afterschool club for middle school aged teens looking for a safe environment to do homework, make new friends, enjoy various STEM projects while engaging in fun physical activity. Our dependable staff will encourage participants to be creative and innovative thinkers. Registration forms are available at the main office (Port Tobacco), all community centers, and www.CharlesCountyParks.com.

**Open to Grades 6-8** • Weekly Fee: \$50 One day drop-ins are available for \$15 per day

One-time enrollment fee for both weekly and daily participants: \$25 (per school year)

Program begins Sept. 3 and is ongoing throughout the school year.

## Registration Packet Required

Packets are available at the Charles County Recreation Registration office, all Community Centers, and online at:

www.CharlesCountyParks.com

Call for Details: 301-932-3470

### Beyond the Bell Program Policies & Procedures

#### **Program Activities**

The afternoon will begin with a snack and homework time. Remaining time will consist of recreational activities in the cafeteria, gymnasium, or classroom. The Beyond the Bell Program does not meet on days the school is closed. The Beyond the Bell Program will meet on scheduled early dismissal days.

#### Sign In/Sign Out

Following the last school bell, students must go to their lockers, retrieve all necessary materials, and sign themselves in at the Beyond the Bell Program. Participants must be signed out by a parent, guardian, or authorized adult (children may sign themselves out with written permission from the parent or guardian). Authorized adults must be listed on the registration form. Any changes must be submitted in writing. Participants will not be released to any person not listed. Staff will ask for proper ID prior to signing out. Please notify the Community Center if your child will not be attending.

#### **Emergency Contact**

Two emergency contacts for each participant are required to be on file. If participant becomes ill or injured during program hours, parent/guardian will be contacted immediately. If parent/guardian is not available, emergency contact will be called.

## Registration Policies & Procedures

The attached registration form can be completed when registering online. Customers who do not register online can complete and send the form with payment manually. The registration form is mandatory one time only, per school year, and can be updated at the parent discretion. Go to www.CharlesCountyParks.com to register online.

#### **Weekly Fees**

The Beyond the Bell Program is an ongoing program requiring weekly registration and payments (\$50/wk). Payment is due the Friday before the upcoming week. **A \$10 late payment fee** will be assessed if payment is not received by Monday at midnight of each week. Once a late fee has been assessed, the registered student will be allowed to participate in the program for that week; however, will not be permitted to attend the following week until the balance is cleared and an advance payment is made for the next week.

#### **Inclement Weather**

The Beyond the Bell Program will have normal operations on all days when the school may announce "all after school and evening activities canceled." On early dismissal closures due to inclement weather, the Beyond the Bell Program will operate for three hours after the early dismissal time of the particular school.

#### **Code of Conduct**

The Code of Conduct is included in this packet so that participants and their families are informed of the behavior expected of all participants for the safety, health and happiness of the participants and staff.

- Participants are treated with respect and are to be respectful of others.
- Participants are to be respectful of school property and the property of others.
- Participants are to use proper language.
- Participants are to stay with their designated group and leaders during the program and obey designated program boundaries.
- Participants are to show good sportsmanship.

#### **Disciplinary Policy/Procedures**

Participants are expected to conduct themselves in a manner which does not jeopardize themselves, other participants, staff, or the facility. The following

#### Online Registration www.CharlesCountyParks.com

Online registration is available for most programs.

Please take note of the following regarding your online registration:

- Instructions for logging into the system are provided online.
- Registration for minors (18 and younger) requires adult input and information.

Online payments are accepted by MasterCard, Visa and Discover only.

#### **Standard Enrollment**

Payment is due at the time of registration.

Checks and money orders must specify the program by code and must be for the exact amount, payable to:

#### **Charles County Commissioners**

Checks must include the current address, telephone number, and drivers license number with expiration. Information must be included for the person making payment.

Cash payment is only accepted at the main office at 8190 Port Tobacco Road. Cash is not accepted at our Community Centers.

**Discover, MasterCard and Visa** payments are accepted in person, and by mail at all Community Centers and the Recreation office. Fax available at the Registration Office only.

Phone-in registration is not available.

procedures will be used to address disciplinary problems for participants who fail to abide by rules and regulations set by Charles County Department of Recreation, Parks & Tourism.

<u>1stInfraction</u> — Verbal warning by staff. Parent/ Guardian will be verbally notified of incident.

 $2^{nd}$  Infraction — Written warning sent home. Parent/ Guardian will be called by staff to discuss incident. Child may be denied the right to participate in the next activity or special event.

<u>3<sup>rd</sup> Infraction</u> — Parent/Guardian conference will be scheduled immediately to identify problem and discuss solutions.

After a conference, if child's behavior does not improve, child may be expelled from program. Parent will forfeit any fees for the remainder of the session. If a child is suspended from any public school, they may not attend any afterschool activities.

NOTE: Serious infractions may warrant immediate expulsion from program.

#### Late Pick-Up Fee

All Beyond the Bell Programs end at 6 p.m. Participants are to be picked up no later than 6 p.m. A late pick-up fee of \$10 per child will be assessed for the first 15 minutes (or part thereof). The fee will be \$1 per minute thereafter.

Mail-in payments with a signed registration form are only accepted at:

Charles County Dept of Recreation, Parks & Tourism Attn: Registration Office 8190 Port Tobacco Road Port Tobacco, MD 20677

#### **Refund Policies**

All requests for refunds must be received, in writing, seven working days prior to the start of a program. Fax requests for refunds are accepted at 301-934-5624. Written requests can be emailed to webtrac@charlescounty.org

After the program has begun, a prorated refund, based on participation, may be approved if requested in writing with medical verification received prior to the end of the program.

No refunds will be considered after a program has ended.

Approved refunds will be assessed a \$10 administrative fee per child, per session regardless of circumstances.

Late fees are non-refundable.

#### **Returned Check Fees**

Checks returned for insufficient funds or other reason will incur a fee of up to, but not more than, \$35 for each occurrence. We do not re-deposit returned checks. Only cash or money order accepted for face value of check, plus abovementioned return check fee. Persons who fail to rectify this obligation will be denied participation in all Charles County Government programs.

# **Beyond the Bell Registration**

#### **ONE FORM PER PARTICIPANT • PLEASE PRINT**

| Parent/Guardian Name:   |                          |           |              |        | E-Mail Address:                                |                   |              |        |         | Weekly Payment   |                     |                      |            |
|---|--------------------------|-----------|--------------|--------|--|-------------------|--------------|--------|---------|--|---------------------|----------------------|------------|
| Mailing Address City  |                          |           |              |        | State Zip COU                                  |                   |              | OUNTY  |         | CIRCLE location you are registering for:     DA HA HE MA PI SM SO ST   |                     |                      |            |
| Phone Home  | none Home Work           |           |              |        |  | Cell              |              |        |         | Weekly Paymer  |                     | due Friday prior     |            |
| Parent/Guardian Name:   |                          |           |              |        | E-Mail Address:                                |                   |              |        | \$50/pp |  | of each week.       |                      |            |
| Phone Home  | hone Home Work Cell      |           |              |        |  |                   |              |        |         | Program will meet on early dismissal days,   |                     |                      |            |
|   |                          |           |              |        |  |                   |              |        |         | <ul> <li>but will not be held when schools are closed</li> <li>FEES ARE NOT PRORATED ON SHORT WEEKS</li> </ul> |                     |                      |            |
| Participant Information   |                          |           |              |        |  |                   |              |        |         | FEES /   | ARE NOT PRO         | RATED ON SI          | HORT WEEKS |
| First Name Last Name  |                          |           |              |        |  |                   |              |        |         | CHECK  | CODE                | AVAILAB              | LE WEEKS   |
| Age Date of Birth   |                          |           |              |        |  | Sex (circle)      | M            | F      |         | 540001   | 9/3/19              | 9/6/19               |            |
| School Currently Attending  |                          |           |              |        | Grade  |                   |              |        |         | 540002   | 9/9/19              | 9/12/19              |            |
| Special Health Conditions,<br>Disabilities, or Diagnosis  |                          |           |              |        |  |                   |              |        |         | 540003   | 9/16/19             | 9/20/19              |            |
|   |                          |           |              |        |  |                   |              |        |         | J  | 540004              | 9/23/19              | 9/27/19    |
| <b>Emergency Contacts:</b> If participant becomes ill or injured during program hours, the parent/guardian will be contacted. For those times when  |                          |           |              |        |  |                   |              |        |         | 540005   | 9/30/19             | 10/4/19              |            |
| the parent/guardian is not available, please list two <u>additional</u> emergency contacts:           1) Emergency Contact Name         Relationship         Phone:   |                          |           |              |        |  |                   |              |        |         | 540006   | 10/7/19             | 10/11/19             |            |
| 1) Emergency Contact Name   |                          |           |              |        |  | Phone: Phone:     |              |        |         |  | 540007              | 10/15/19             | 10/18/19   |
| 2) Emergency Contact Name   |                          |           |              | Kelati | onship   |                   |              |        | ]       | 540008   | 10/21/19            | 10/25/19             |            |
| Transportation Release: Participants must be signed out by a parent/guardian each day. Please list other authorized individuals who may sign  |                          |           |              |        |  |                   |              |        |         | 1  | 540009              | 10/28/19             | 11/1/19    |
| your child out (list relationship). Any changes to these approved individuals must be made in <u>writing</u> . This form acts as permission for your child to arrive/   |                          |           |              |        |  |                   |              |        |         | 540010   | 11/4/19             | 11/8/19              |            |
| depart from the Afterschool Activities Program by the individuals listed. If you wish the participant to arrive or depart by WALKING, RIDING A BIKE, or OTHER, then additional written parent/quardian permission is required. You must provide an explanation and identify the alternate form of transporta-   |                          |           |              |        |  |                   |              |        | 540011  | 11/12/19   | 11/15/19            |                      |            |
| tion in your correspondence.  |                          |           |              |        |  |                   |              |        |         | 540012   | 11/18/19            | 11/22/19             |            |
| 1) Name   |                          |           |              | Relat  | ionship  |                   | Phone:       |        |         |  | 540013              | 11/25/19             | 11/26/19   |
| 2) Name   |                          |           |              | Relat  | ionship  |                   | Phone:       |        |         | ]  | 540014              | 12/2/19              | 12/6/19    |
|   |                          |           |              |        |  |                   |              |        | í       | 540015<br>540016   | 12/9/19<br>12/16/19 | 12/13/19<br>12/20/19 |            |
| Register online at www.CharlesCountyParks.com Make checks payable to:   |                          |           |              |        |  |                   |              |        | N/A     | 12/10/19   | 1/1/20              |                      |            |
| You can even register for all or multiple weeks at one time! Charles County   |                          |           |              |        |  |                   |              | 540018 | 1/2/20  | 1/3/20   |                     |                      |            |
| The Beyond the Bell Program is an ongoing program for kids in grades 6-8.   |                          |           |              |        |  |                   | rs           |        | 540019  | 1/6/20   | 1/10/20             |                      |            |
| Program operates Monday-Friday except during school closings. Weekly  |                          |           |              |        | kly  | Fax: 301-934-5624 |              |        |         |  | 540020              | 1/13/20              | 1/17/20    |
| registration and payments (\$50/wk) are required. Payment is due the Friday before the upcoming week. A <b>\$10 late fee</b> will be assessed if payment is not   |                          |           |              |        | ·  |                   |              |        |         |  | 540021              | 1/22/20              | 1/24/20    |
| received by Monday at midnight of each week. Once a late fee has been ass   |                          |           |              |        | sed, Department of Recreation, Parks & Tourism |                   |              |        |         |  | 540022              | 1/27/20              | 1/31/20    |
| the registered student will be allowed to participate for that week; how<br>will not be permitted to attend the following week until the balance  |                          |           |              |        | , and the gist dubit office                    |                   |              |        |         |  | 540023              | 2/3/20               | 2/7/20     |
| and an advance payment is made for the next week.   |                          |           |              |        | Port Tobacco, MD 20677                         |                   |              |        |         |  | 540024              | 2/10/20              | 2/14/20    |
| No confirmations will be sent. You may assume you are registered unless otherwise contacted. Charles County Government is not responsible   |                          |           |              |        |  |                   |              |        |         | 540025   | 2/18/20             | 2/21/20              |            |
| for program cancellations will be sent. Tou may assume you are registered unless otherwise contacted. Charles County Government is not responsible<br>for program cancellations due to Charles County Public Schools programming. I agree to participate or to allow my child to participate in these<br>programs knowing that safety precautions will be taken but realizing that the Charles County Government does not have accident insurance for   |                          |           |              |        |  |                   |              |        |         | 540026   | 2/24/20             | 2/28/20              |            |
| participants. I do hereby release and hold harmless Charles County, Maryland, its officials, employees, instructors, and volunteers from any and all liabilities arising from any injuries that might occur during the supervised programs. I as the child's parent and/or guardian, do hereby authorize  |                          |           |              |        |  |                   |              |        |         | 540027   | 3/2/20              | 3/6/20               |            |
| the Charles County Government to take photographs and video of me/my child or my property for promotional and/or educational purposes. I do hereby authorize the Charles County Government to release the information for promotional purposes. I acknowledge that I have been informed that activities in which l/or my child participate may be shared through Charles County Government and Charles County Berzeation Parks and the shared through Charles County Government and Charles County Berzeation Parks and the shared through Charles County Government and Charles County Berzeation Parks and the shared through Charles County Government and Charles County Berzeation Parks and the shared through the |                          |           |              |        |  |                   |              |        |         | 540028   | 3/9/20              | 3/13/20              |            |
| that activities in which <i>l/or</i> my child participate may be shared through Charles County Government and Charles County Recreation, Parks and<br>Tourism website and social media accounts, including photographs and live streaming videos, and I authorize and provide my consent for me/my<br>child to being included in any such photographs or live streaming videos. I hereby state that this release is freely, willingly, and voluntarily made.  |                          |           |              |        |  |                   |              |        |         | 540029   | 3/16/20             | 3/20/20              |            |
|   |                          | -         | -            |        | e ıs treely, willi                             | ingly, and volunt | tarily made. |        |         |  | 540030              | 3/23/20              | 3/27/20    |
| Forms without   | t signatures wil         | l be re   | turned       | •      |  |                   |              | D      | SC VER  |  | 540031              | 3/30/20              | 4/3/20     |
| Your signature acknow   | edges that you have read | d and und | lerstand the | above  | statement                                      |                   |              |        |         |  | 540032              | 4/6/20               | 4/9/20     |
| Fignatura   |                          |           |              | Data   |  |                   |              |        |         |  | 540033              | 4/15/20              | 4/17/20    |
| Signature Date  |                          |           |              |        |  |                   |              |        |         | 540034   | 4/20/20             | 4/24/20              |            |
| <b>Department of Recreation, Parks &amp; Tourism •</b> 8190 Port Tobacco Road, Port Tobacco, MD 20677<br>301-932-3470 • MD Relay Service: 711 • Relay Service TDD: 1-800-735-2258 • Equal Opportunity Employer  |                          |           |              |        |  |                   |              |        |         |  | 540035              | 4/27/20              | 5/1/20     |
|   |                          |           |              |        |  |                   |              |        |         |  | 540036              | 5/4/20               | 5/8/20     |
| Learn more at www.CharlesCountyParks.com  |                          |           |              |        |  |                   |              |        |         | 540037   | 5/11/20             | 5/15/20              |            |
| OFFICE USE ONLY   | Cash Check M/C           | 0 M/C     | Visa Disc    | over   | Staff Initia                                   | al                | Reg #        |        |         |  | 540038              | 5/18/20              | 5/22/20    |
| Check/Card Name   |                          |           | Total \$     |        | Date Enter                                     | red               | Househo      | old ID |         |  | 540039              | 5/26/20              | 5/29/20    |
| Check/Card #  |                          |           |              |        | Card Exp                                       |                   | Securit      | y #    |         |  | 540040              | 6/1/20               | 6/5/20     |
| W/I M PH  | FX HA HE                 | MA        | DA           | PI     | SM S   | O ST              | WA D         | PRT    | LK NP   |  | 540041              | 6/8/20               | 6/12/20    |