



ConnectiKids

Educating, Enriching, and Empowering Hartford's Youth Since 1978



814 Asylum Avenue Hartford, CT 06105
Office: (860) 522-8710 Fax: (860) 249-5901

ConnectiKids Virtual Summer Program Registration Form - 2020

ConnectiKids summer registration for Hartford students is open! The program fills up quickly so avoid disappointment by registering early! Fill it out completely and send it back via email to ksteele@ct-kids.org or you can drop the complete registration to our office.

- I would like information about volunteering with ConnectiKids
- Save the postage: I would use the ConnectiKids webpage to obtain my child's health forms and Informational Handbook
- I would like to be, mailed the Health forms and Informational handbook

TODAY'S DATE: _____ **APPLICATION (STAFF USE ONLY) #** _____

PROGRAM TIME: 9:30 A.M. - 3:00 P.M.

STUDENT INFORMATION

SCHOOL NAME: _____

Name (last) _____ (first) _____ M/F _____

Address _____

City _____ Zip Code _____ Phone Number _____

Age _____ Date of Birth (00/00/0000) _____

Grade (Current School Year) _____ Teacher's Name _____

PARENT INFORMATION

Name of Parent or Guardian _____

Cell Phone _____ Home Phone _____ Work Phone _____

Parent Email Address _____ ***Required***

Parent Social Security Number _____ (in case of emergency)

IMPORTANT - EMERGENCY INFORMATION AND CONTACTS (OTHER THAN PARENTS)

1. Name _____ Phone _____ Relationship _____

2. Name _____ Phone _____ Relationship _____

If the child is living with only one parent, who is the legal guardian of the child who can consent to his or her attendance at the Summer Program? (Please print full name) _____

Can child be released from the Summer Program to the emergency contact in case of emergency or illness?
 Yes No

If the child is living with only one parent, who is the legal guardian of the child who can consent to his or her attendance at the Summer Program? (Please print full name) _____

Can child be released to non-custodial parent if another parent makes that request? Yes No

If yes, name of Parent: _____

I give permission for my child to participate in all camp activities.

I will read the parent handbook, the summer schedule, and behavior agreement and agree to cooperate with all the regulations.

I am willing to have my children treated by a Nurse or First Aider for minor ailments and by a doctor, when necessary, and agree to transportation to a medical facility or for further medical attention, if necessary.

My child has permission to take scheduled trips (if trips are included in program) out of camp during camp session.

I have read and accept the policies and procedures of ConnectiKids Inc.

Guardian's Signature _____

Date Signed _____

Health History and Ethnicity

Health History (check if "yes")	Allergies (check if "yes")	Chronic Illness (check if "yes")
<input type="checkbox"/> Chicken Pox <input type="checkbox"/> Measles <input type="checkbox"/> German Measles <input type="checkbox"/> Mumps <input type="checkbox"/> Whooping Cough <input type="checkbox"/> Other Date of last tetanus booster _____ Date of last physical exam _____	<input type="checkbox"/> Hay fever <input type="checkbox"/> Insect Sting <input type="checkbox"/> Asthma <input type="checkbox"/> Ivy, Oak, etc. Drugs (specify) _____ Foods (specify) _____ Other (specify) _____	<input type="checkbox"/> Earaches <input type="checkbox"/> Throat Problems <input type="checkbox"/> Heart <input type="checkbox"/> Infections <input type="checkbox"/> Epilepsy <input type="checkbox"/> Stomach <input type="checkbox"/> Sinus <input type="checkbox"/> Diabetes

Medications: Is your child presently taking medication yes no

Please specify _____

PLEASE FILL OUT THE FOLLOWING GENERAL BACKGROUND INFORMATION OF YOUR CHILD COMPLETELY. CONNECTIKIDS USES THIS INFORMATION FOR GENERAL REPORTING PURPOSES

Ethnicity: Check all that apply

Race: Check all that apply

African	
Albanian	
Bosnian	
Chicano	
Cuban	
Hispanic	
Jamaican	
Korean	
Latino	
Mexican	
Polish	
Puerto Rican	
Russian	
Samoan	
Vietnamese	
None Specified	
Other	

American Indian or Alaska Native	
Black or African American	
Native Hawaiian or Other Pacific Islander	
White	
Asian	
Did Not Volunteer	
Some Other Race	

Parent Signature: _____ Date Signed _____

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Policies/Procedures

**** Please read the following information carefully and sign the bottom of the form. Your signature below indicates that you agree to follow the stated policies and procedures. ****

Policies/Procedures

- Students must join Zoom class at 9:30 a.m. and no later than 10:00 a.m.
- I give my child permission to attend online classes with ConnectiKids via Zoom.
- I will pick up my child's Education Kits every Friday between 1:00 p.m.- 5:00 p.m.
- **My child is receiving a Scholarship to attend the ConnectiKids Summer Program.**
- **Should my child have 3 unexcused absences without proper communication from the program, they may be removed and another child from the waiting list will assume their spot. Please ensure that all communication to ConnectiKids are timely and clear.**
- If my child should have any behavior problems at the summer program, I will be contacted and asked to meet with ConnectiKids staff. After meeting with staff, my child may be dismissed from the program if his/her behavior problems continue.
- I understand that my child will participate in physical activities (such as rope climbing, etc.) and give my child permission to do so. I agree to hold harmless ConnectiKids, Inc. in case of accident or injury.
- ConnectiKids staff are mandated reporters. Please keep in mind that we hear or are told by your student of the following: Child Abuse, Physical Abuse, Sexual Abuse, General Child Safety. We are mandated by law to report it to ensure the safety of the student.



I hereby agree that all photographs, negatives, prints, paintings, drawings, sketches, reproductions, and likenesses of any kind made of the child are and shall remain the property of ConnectiKids, Inc. I give my permission that said works may be published, displayed, reproduced, and circulated in any form by ConnectiKids, Inc. with or without the child's name for commercial purposes or otherwise, including advertisement in any media, and with or without any testimonial copy or other form of advertising or display.

If in the event that I cannot be reached in an emergency, I hereby give permission to the physician, Hartford Hospital, and/or St. Francis Hospital selected by ConnectiKids staff to hospitalize, secure proper treatment for, to order injection, anesthesia or surgery for my child as named herein.

In the event that my child, as named herein, should require basic first aid and/or minor treatments, as ordered by ConnectiKids staff, I give permission for the health care professional to administer such aid or treatment for my child.

I/We understand that in signing this registration, I/We agree to hold ConnectiKids, Inc. harmless in case of illness, accident or injury, and that our family's medical plan will cover any expenses. In signing this, I agree to the above rules and regulations of ConnectiKids, Inc.

Parent/Guardian Signature _____ Date _____

Parent/Guardian Signature _____ Date _____

Parent/Guardian Consent Form

Virtual Programming for ConnectiKids Inc.

Dear Parent/Guardian,

In order to serve students during this summer, ConnectiKids is providing a **distance-based, virtual program**. Our staff members will facilitate program activities through online platforms. ConnectiKids will use software, tools and applications provided by third parties that students, parents/guardians and/or staff will access via the Internet and use for purposes of communication and programming. We will use Zoom to interact and stay connected.

This letter seeks consent for your child to utilize **Zoom** for distance-based, virtual program purposes. Please review Zoom's privacy terms and conditions carefully before registering your student: <http://zoom.us/terms> and <http://zoom.us/privacy>. If you do choose to register for Zoom, you will be asked to provide basic information, not limited to name and email address.

What is Zoom?

Zoom is a platform to provide safe video and chat-based educational and fun experiences on computers, tablets and smartphones.

How does Zoom work?

ConnectiKids staff host "meetings" through their Zoom accounts, and can then invite students, only through their parent/guardian, to join the meeting.

Neither students nor parent/guardians need Zoom accounts, but you will need access to the internet and a computer, phone, or tablet. You will also need a quiet space for students to participate in Zoom meetings.

How will we use Zoom?

Parents will pick up weekly Educational Kits for their student to use at home. We will virtually gather students and staff for Morning Book Club, Core Class, Cooking, Gardening, STEM, and Arts. Our Zoom meetings will allow students to connect and engage with each other and staff online.

Our commitment to keeping the young people we serve safe is always our number one priority. ConnectiKids will actively monitor student and staff activity on Zoom, and will make every effort to protect student information by, among other things, maintaining control of, and access to, the data collected; prohibiting re-disclosure of student information; limiting the purposes for which the online platforms may use student information; ensuring there is no advertising and that no student information is collected for commercial purposes.

Further, all activities online must comply with ConnectiKids safety policies.

If you consent to your student using Zoom, please sign below:

Parent/Guardian Signature _____ Date _____

If you have any questions, please feel free to contact us at 860-522-8710 or by email at ksteele@ct-kids.org

Thank you,
ConnectiKids Inc.

Educational Kits

ConnectiKids strives for an interactive virtual summer with the students. We will distribute Educational Kits weekly on Fridays from 1:00 p.m. to 5:00 p.m. Parents can pick up materials during the time frame shared above.

If you cannot pick up materials during the time frame we provided, please make sure to share that with the Program Director, Kiera Steele or the Program Coordinator, Lilibeth Mendoza. We will work with you to ensure that your student has the materials they need to have a successful and enriching program week.

If you agree to pick up Educational Kits weekly for your student, please sign below:

Parent/Guardian Signature _____ Date _____

Directions and instructions for entering the building:

We are located at 814 Asylum Avenue, Hartford CT 06105 (From the street you should look for a big Church – Asylum Hill Congregational Church with blue doors).

Once you pull into the parking lot, you will see a ConnectiKids staff member there. Please wear a face mask and roll down your window to communicate with the staff member what group your student is in. After that, unlock your backseat or pop your trunk. We'll bring the Educational Kit to you!

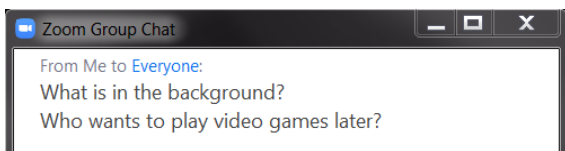
ConnectiKids Inc. Virtual Summer Program Code of Conduct – Summer 2020

I hereby accept and abide by the provisions of the following statement:

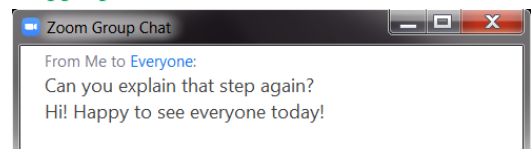
ConnectiKids Inc. Virtual Program has rules that we have to follow during Zoom meetings. This Code of Conduct, combined with our own goals and expectations, is our guide for behavior that is expected at CTKIDS. During my Zoom sessions, I am expected to:

- Set up before my meeting time in a place without distractions (siblings, television, cellphone, etc.)
- My attention will be on the instructor or speaker
- Mute my microphone to allow others to hear
- Use the raise hand feature to ask a question
- Unmute myself when the instructor calls on me
- When I share, I will be respectful and on topic
- Show responsibility and use Zoom for educational purposes only
- Use the chat feature appropriately

NOT what Zoom chat is for



Appropriate for Zoom chat



I understand that if I am disruptive, and my instructor must talk to me three times during the Zoom meeting, my parent will be contacted. If the disruption continues, I will be **removed** from Zoom room by the instructor.

Student Name:

I hereby accept and abide by the provisions of the following statement:

I have discussed the above with the participant and feel that they understand what is to be expected of them while participating on Zoom with the ConnectiKids Inc. Virtual Program. I also understand that my student could be removed from Zoom if they do not adhere to the rules and regulations of ConnectiKids Inc.

Guardian Name

Relationship
