



**YOUTH SERVICES  
DEPARTMENT**

**OLYMPUS SPORTS COLISEUM  
YOUTH SERVICES DEPARTMENT**

**SPARTAN KIDS AFTER-  
SCHOOL PROGRAM  
REGISTRATION FORM**

**20\_\_\_\_\_ - 20\_\_\_\_\_**

Please complete the following information (Please print or type).

Child's Name: \_\_\_\_\_

Gender: \_\_\_\_\_ Male \_\_\_\_\_ Female

Nationality (Optional): \_\_\_\_\_

Fall School Grade: \_\_\_\_\_

Student's Date of Birth: \_\_\_\_\_

Student's Age: \_\_\_\_\_

Student's School: \_\_\_\_\_

Name of Parent(s) /Guardian(s): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Residency: \_\_\_\_\_ North Natomas \_\_\_\_\_ South Natomas \_\_\_\_\_ North Sacramento \_\_\_\_\_ Rio Linda  
\_\_\_\_\_ Del Paso Heights \_\_\_\_\_ Other

Home Phone Number: \_\_\_\_\_ Work Number; \_\_\_\_\_

Cell Number: \_\_\_\_\_

**Note: If any of the above information changes, please notify the YOUTH SERVICES DEPARTMENT office immediately.**

**EMERGENCY CONTACT INFORMATION**

**List two emergency contacts other than those listed above:**

\_\_\_\_\_  
Name Relationship Home Phone Work Phone

\_\_\_\_\_  
Name Relationship Home Phone Work Phone

**Medical Problems/Allergies:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## EMERGENCY MEDICAL RELEASE

If emergency medical care is necessary and I cannot be reached, I authorize Olympus Sports Coliseum and the Youth Services Department to act in my behalf in granting permission for my child to receive emergency medical treatment. Parents are responsible for all expenses incurred as the result of medical treatment.

\_\_\_\_\_  
Parent/Legal Guardian Signature

\_\_\_\_\_  
Date

### AFTER-SCHOOL PROGRAM

**The After-School Program will run from the middle of August when school starts until school is out in May.**

- Students at the Westlake Charter School, Robla Elementary, Heron School, Natomas Park Elementary, Dry Creek Elementary, and Natomas Charter Middle School will be transported to the Olympus Sports Coliseum facility by a YSD van. Parents must plan with their child's school to have their child placed on the YSD-Spartan transportation list for after school.
- Hours of operation are for 3:00 – 7:00 P.M. Monday through Friday.
- **Parents must pick their child up by 7:00 P.M. or a late fee of \$1 per minute will be assessed after 7:00 P.M.**
- SPARTAN KIDS AFTERSCHOOL is closed on all NUSD school professional developments, holidays, and breaks.
- SPARTAN KIDS AFTERSCHOOL is open early for all NUSD Early Release Days.
- An after-school snack will not be provided by the YSD. They can purchase snacks from our Snack Shack.
- Please remember that the SPARTAN KIDS After-School Program is not a babysitting service. Children are expected to interact with other children. Children are required to participate in all activities as instructed by the YSD staff.
- Failure to follow the rules can result in your child being expelled from the After-School Program.
- If a child is expelled from the After-School Program, there will be **no refund** of the registration fee.
- Disrespect of the YSD staff, refusal to follow instructions, fighting, bullying of any type, are ground for immediate dismissal.
- **A NON-REFUNDABLE registration fee of \$20.00 per child per school year is charged for the After-School Program. The entire \$20.00 is due regardless of the number of months the child attends the program. A \$100.00 deposit must be made to secure your child's spot in the program. This deposit will go towards your first month's payment. There is no refund for early withdrawal from the program.**

### HOLD HARMLESS RELEASE

I hereby waive, release, absolve, indemnify, and agree to hold harmless the Olympus Sports Coliseum, the Youth Services Department, its directors, officers, organizers, sponsors, supervisory staff, participants, and any other affiliates; for, from, and against all liability because of any bodily injury, or property damage, known or unknown, which may occur or result from the participation of the above named child in any and all activities whether the result of negligence or for any other cause of the Olympus Sports Coliseum. I individually, and as a parent/guardian for my child, have read this release and understood all the terms. I execute it voluntarily and with full knowledge of its significance.

Release made this \_\_\_\_\_ of \_\_\_\_\_, 20\_\_\_\_ by \_\_\_\_\_  
Day Month Parent's Signature

## CODE OF CONDUCT

Positive attitudes keep the After-School Program fun. Below are some guidelines participants are expected to follow:

- Respect yourself and the YSD staff
- Play fairly and be honest
- Applaud the efforts of others
- Avoid inappropriate language
- Eat and drink in designated areas
- Say only good things about others
- Follow the instructions of the YSD staff
- Resolve disagreements in a positive way
- Running allowed in gym or outside field areas
- Listen during appropriate times and assemblies
- Be respectful of other members and their property
- Tobacco, drugs, alcohol, and weapons are prohibited
- Take care of the YSD facility, grounds, and equipment
- If you make a mess, you clean it up

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Child's Signature

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Date

## AUTHORIZATION TO PRODUCE AND USE AUDIOVISUAL MATERIALS

I hereby voluntary and without compensation authorize the Olympus Sports Coliseum and the Youth Services Department. to produce photographs, movies, videotapes, audio-tapes, and Power Point Presentations of the below named student. This authorization is given on the condition that the materials taken or produced will be used for community education or program promotion. I understand Olympus Sports Coliseum; the Youth Services Department and its employees will not use these materials for compensation.

I understand that this grant of permission shall only be revoked by a written instrument delivered to the Youth Services Director of the Youth Services Department at Olympus Sports Coliseum. This consent shall remain in effect, unless revoked.

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Name of Student

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Name of Parent/Legal Guardian

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Date

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Signature of Parent/Legal Guardian

## BULLYING/HARASSMENT/FIGHTING POLICY

Bullying/harassment/fighting has no place at Olympus Sports Coliseum or the Spartan Kids Afterschool Program. Bullying/harassment/ fighting means more than beating up or pushing people around.

Violation of this policy includes:

- Physical assaults (touching in angry ways)
- Threats (“Better watch your back”, “I’m gonna hurt you”, “We’re gonna get you”, etc.)
- Harassment (always bothering someone)
- Name-calling
- Racial slurs
- Intimidation
- Sexual harassment – physical or verbal
- Spreading rumors
- Extortion
- Foul language
- Taunting
- Making insulting remarks about another student’s family members
- Using the internet to harass, threaten, verbally abuse, intimidate, or spread rumors

Violation of the intent of this policy by a participant of the Spartan Kids Afterschool Program will not be tolerated. Review of the policy serves as your WARNING.

- If you are found to be in violation of this policy, you will be suspended for up to one week.
- On the second offense you will be suspended for the remainder of the program. **There will be no refund of registration fees due to a student suspension.**
- The enforcement of this policy and any judgment on the punishment of a student for violation of this policy will be the decision of the Youth Services Director or Spartan Kids Program Coordinator or both and is not subject to a hearing or appeal.

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Student’s Signature

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Date

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Parent/Guardian Signature

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Date

## **CHECK-OUT AUTHORIZATION FORM**

**Student's Name:** \_\_\_\_\_

The following individuals are authorized to check-out the above-named student from all Spartan Kids activities.

1. Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

2. Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

3. Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

4. Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

5. Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Note: Add additional names if needed.

**Please note, if anyone is PROHIBITED from contacting or checking-out the student. Specify the individual(s) below:**

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

**Parent/Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_



**YOUTH SERVICES  
DEPARTMENT**

## SPARTAN KIDS AFTERSCHOOL PRICING SHEET

# of Hours/month	Rate/ 1 Child	Rate/2 Children	Rate/3 Children
<b>80-100</b>	\$400	\$760	\$1120
<b>60-80</b>	\$360	\$684	\$1008
<b>40-60</b>	\$280	\$588	\$784
<b>20-40</b>	\$160	\$304	\$448
<b>Punch Card</b>	\$100 Punch Card for up to 20 hours		

- **Hours are based on a full school month and doesn't include early out days or minimum days.**
- **Hours can be used however you like during the month. THEY DO NOT ROLL OVER.**
- **Staff of the Spartan Kids Afterschool program will keep track of the hours your child attends and will inform you when you have less than 10 hours available.**
- **If you purchase a punch card, it can only be used in the school year it is purchased and it can be used in any month. It may also be used for any sibling that also attends the program.**
- **You must have a Credit card/Debit Card on file. Your card will be charged on the 1<sup>st</sup> of each month. If your card is declined for any reason, you will be notified by phone and another form of payment can be taken. We do accept cash and check, but it must be paid prior to your child attending the program. NO EXECPTIONS**