

**GLASTONBURY YOUTH AND FAMILY SERVICES
PROGRAM REGISTRATION FORM**

I give permission for my child to participate in the Glastonbury Youth and Family Services
Positive Youth Development Programs for 7/1/2022 thru 6/30/2023

PARTICIPANT INFORMATION

Participant's Name: _____ Date of Birth: ___/___/___ Age: _____

Participant's Cell Phone: _____ Participant's E-mail _____

Address: _____ City: _____ Zip: _____

School: _____ (present school/grade) Grade: _____ Gender: _____

Parent/Legal Guardian Name: _____

Preferred Phone #: _____ E-mail: _____

How may we contact you regarding program updates (i.e. cancellations, etc.)

Text Message E-mail Do not contact

Demographics (Optional)

Race:

___ American Indian/Alaska Native
___ Asian
___ Black/African American
___ Native Hawaiian/Other Pacific Islander
___ Multi-Racial
___ White

Ethnicity:

___ Hispanic/Latino
___ Not Hispanic/Latino

[Note: We provide certain demographic information to the State of CT
Department of Education for statistical and research purposes]

▶ PERMISSION TO VIDEOTAPE AND PHOTOGRAPH.

I give permission to staff members of Glastonbury Youth & Family Services to videotape and/or photograph my child in agency programs for publicity and/or reporting purposes.

(Please check this box if you **DO NOT WANT** your child videotaped or photographed).

▶ HEALTH INFORMATION

Are there any health issues you would like the staff to be aware of regarding this individual?

In the event of your child requiring medical attention we will need your written consent. Please sign this document to grant permission for emergency medical treatment.

▶ PERMISSION TO TRANSPORT PARTICIPANT

I give permission for my child to be transported in a town vehicle to and from activities as required for the above indicated program. (Field trips will require a separate permission form, which will be provided as appropriate)

▶ WAIVER RELEASE FORM

Being of full age and inconsideration of my child's participation in this program I do hereby release and forever discharge the Town of Glastonbury, its agents and employees, its representatives, successors, and assignees from all claims arising out of any personal injuries, damages, expenses, and any loss of damage whatsoever resulting or which may result from participation in this program.

PARENT or GUARDIAN'S SIGNATURE: _____

PRINTED NAME: _____ Date: ___/___/___

FOR OFFICE USE ONLY

CE _____ Outreach _____ SAPC _____

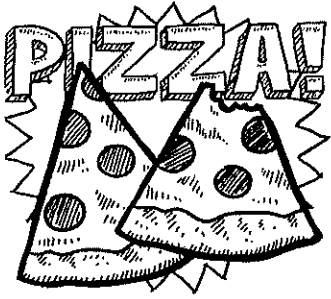
CHECK NO. _____

Dear Residents,

August 5, 2022

Join Glastonbury Youth and Family Services (who co-sponsor WACY summer camp) for

ACE Wednesdays (After school Creative Experiences) for the 2022-2023 school year!



WHAT: Our free afterschool program brings together youth in grades K-5 with high school and adult mentors for a number of activities including **homework assistance, field trips, arts and crafts, snacks, and outdoor games.**

WHEN: **1:15pm- 3:15pm** Wednesdays after school (September 14th 2022 through May 24th 2023)

WHERE: ACE will meet in the community room at the Welles Village Housing Authority

To register: Please email jason.stankowski@glastonbury-gov or fill out the attached registration form and bring with your child on Wednesday, September 14th to our first session. Additional registration forms will be available in the lobby of the housing authority.

Do you have a child in **9-12th grade** who would like to be a **volunteer mentor**? For more information and a mentor application, please email Jason at the address above or call him at 860-652-7675.

