



Toddler Drop Off

Registration Information

This is a part time program for toddlers ages 2-5 that are fully potty trained. It is offered Tuesdays and Thursdays** from 9:00AM until 12:00PM on a full time basis. (Drop-in is available but subject to absence of a full time enrollee.) Enroll your child for a fun-filled day of learning, playing, and growing with friends.

**some holidays excluded

AGES: 2-5 year (*Children MUST be fully potty trained)

CLASS SIZE: 15 toddlers, 1 instructor, and 1 volunteer

LOCATION: Activity Room, Tot Room, Under the Sea Room.

FEE: \$75.00 for 10 consecutive sessions
\$10.00 for 1 session drop-in

DROP-OFF/PICK-UP POLICY: All Children must be dropped off by 9:30AM or are considered ABSENT. Please let the director know in advanced if your child will not be attending a session. Absent spots will open to drop-in after 9:30AM, but MUST be dropped off by 9:45AM

SIGN IN AND OUT EVERY SESSION: Sign in sheet will have a list of full time registrants and keep track of their sessions. Drop-ins will sign in underneath full timers. All participants are required to be signed in and out EVERY SESSION. Photo identification is required at pick up to ensure children are released properly. YOU MUST BRING ID TO PICK UP CHILDREN.

WHAT TO BRING: Every session bring a change of clothes in case of unforeseen accidents. Your child will be given a cubby space to store their things.

ACTIVITIES: Each day is scheduled with games, crafts, centers, learning, singing, and reading. You will be provided with a monthly calendar of planned activities, as well as daily reports of your child's activities.

SNACK: A snack is provided and usually consists of cereal or crackers. Please notify the director if your child has a food allergy or is on a special diet. In the event your child cannot eat the provided cereal or crackers the parent will have to provide a snack for their child each session.

For more information please contact
Jennifer Romberger, Toddler Drop Off Director, at (c) 772-828-7328

Discipline Policy

FIRST WARNING:	CALL MADE TO PARENT TO INFORM THEM OF INCIDENT
SECOND WARNING:	MEETING WITH PARENT, DIRECTOR OR THE RECREATION MANAGER
THIRD WARNING:	SUSPENSION FROM PROGRAM
FINAL ACTION:	EXPULSION FOR REMAINDER OF PROGRAM. (NOT ELIGIBLE TO RETURN UNTIL THE NEXT YEAR)

These are the steps that we will follow with most discipline problems. Please understand that there may be circumstances where we will have to move through these steps more quickly. In case of a severe discipline problem, we have the right to dismiss a child from our program if they pose a threat to other children, our staff, or our program, as determined by personnel.

All major discipline decisions are made by the Recreation Manager and discussed with the Facility Administrator and the Director of Parks and Recreation.



2014-2015
Toddler Drop Off
Port St. Lucie Civic Center



Emergency Contact information

Toddler's Name _____ Age _____ DOB _____

Toddler's Name _____ Age _____ DOB _____

Contact Person: _____ Relationship: _____

Email Address: _____

Phone(H) _____ Phone (W) _____ Cell Phone: _____

Second Contact Person: _____ Relationship: _____

Phone(H) _____ Phone (W) _____ Cell Phone: _____

Approved Pick-up List

Please list additional people authorized to pick up your child(ren) from camp.

Name _____ Phone _____

Name _____ Phone _____

Name _____ Phone _____

Name _____ Phone _____

People listed must bring photo identification in order for staff to release child(ren) to them.

2014-2015
Toddler Drop Off

Allergies

Please list any allergies that your child(ren) may have to food, insects, etc.

1. _____
2. _____
3. _____
4. _____

If no known allergies please check here:

Photo Permission

Please INITIAL:

____ I hereby give my consent to the Port St Lucie Parks and Recreation Department, or persons operating in its authorized behalf, the unqualified right and permission to take photographs, slides, or motion pictures of my child/children for the purpose of reproduction, publication and illustration in all advertising and public media whatsoever.

Child's Name: _____

Parent/Guardian Name: _____

Parent/Guardian Signature: _____

Date: _____

Does your child require any special accommodations for them to participate in this program?
If so, please provide a list of requested accommodations.

CITY OF PORT ST. LUCIE
CONSENT, WAIVER AND RELEASE FORM

Section A only applies to participants 17 years and under

NOTICE TO THE MINOR CHILD'S NATURAL GUARDIAN

- A. READ THIS FORM COMPLETELY AND CAREFULLY. YOU ARE AGREEING TO LET YOUR MINOR CHILD ENGAGE IN A POTENTIALLY DANGEROUS ACTIVITY. YOU ARE AGREEING THAT, EVEN IF THE CITY OF PORT ST. LUCIE USES REASONABLE CARE IN PROVIDING THIS ACTIVITY, THERE IS A CHANCE YOUR CHILD MAY BE SERIOUSLY INJURED OR KILLED BY PARTICIPATING IN THIS ACTIVITY BECAUSE THERE ARE CERTAIN DANGERS INHERENT IN THE ACTIVITY WHICH CANNOT BE AVOIDED OR ELIMINATED. BY SIGNING THIS FORM YOU ARE GIVING UP YOUR CHILD'S RIGHT AND YOUR RIGHT TO RECOVER FROM THE CITY OF PORT ST. LUCIE IN A LAWSUIT FOR ANY PERSONAL INJURY, INCLUDING DEATH, TO YOUR CHILD OR ANY PROPERTY DAMAGE THAT RESULTS FROM THE RISKS THAT ARE A NATURAL PART OF THE ACTIVITY. YOU HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM, AND THE CITY OF PORT ST. LUCIE HAS THE RIGHT TO REFUSE TO LET YOUR CHILD PARTICIPATE IF YOU DO NOT SIGN THIS FORM.

(B) In consideration for participation in the recreation program I hereby expressly and affirmatively state that (circle one) I / my child named herein wish to participate in the recreation program. I realize that participation in this activity involves risk and injury including but not limited to, loss of future earning capacity, loss of or damage to personal property, various degrees in severity of bodily (physical) injury and even the possibility of death. I also recognize that there are many other risks of injury including serious and disabling injuries, which may arise due to my / my child's participation in this activity and that it is not possible to specifically list each and every individual risk. I understand that these risks of injury could arise out of negligent maintenance and/or negligent supervision on the part of the City of Port St. Lucie, its employees, agents and representatives in the operation of the recreation program.

However, knowing the material risk and appreciating, knowing and reasonably anticipating that other injuries and even death are a possibility, I hereby, on the behalf of myself / my child, expressly assume all the delineated risks of injury, all other possible risks of injury and even death which could occur by reason of my / my child's participation and for my child and myself, my personal representatives, executors, administrators, heirs, next of kin, successors and assigns, do hereby release, remise, and forever discharge the City of Port St. Lucie, its agents, employees, representatives, successors and assigns of all liabilities, claims, actions, causes of action, suits, damages, costs, or expenses whatsoever, in law or in equity, which I may have or my child may have against them.

