

# Activity Centers 2021 - Overview



**CRITICAL:** Please make sure your email address and contact information is correct and current **when you register your child** for this program. We need this information in order to make contact with you in case of an emergency.

## *General Activity Center program information.*

- Activity Center activities include fun time indoors, outside, playing games and doing crafts.
- Activity Center dates are **June 7–August 6**. Activity Centers are not open **July 5**. The last day, August 6, is only a half day. All Centers close at Noon on August 6.
- Activity Center hours are **7:45am-5:30pm**. There is no supervision before 7:45am or after 5:30pm. Please pick up your child in a timely manner or they could be dropped from the program.
- There are no Activity Center refunds after the program has started.

## *Information for the parent, for the safety of your child(ren):*

- You **must sign your child in/out each day**.
- If your child is in CampEd, please make sure they report directly to Activity Centers at 12:00. They should not be roaming the halls or on the playground.
- If your child(ren) will be absent from Activity Center, please let staff at your child's center know or call the Park District office at 222-6771.
- **The leaders are not allowed to give medication to the children.**

## *Items your child(ren) needs each day:*

- A sack lunch, as well as a morning and afternoon snack.
- No nuts or peanut butter, please, due to allergies.
- A water bottle. Please label the bottle with your child's name.
- Weather appropriate clothing. **Tennis shoes** are needed for playing games. No flip flops or sandals.

## *Additional Safety Information:*

- **Fighting/hitting of any kind will result in an automatic three day dismissal from the program.** If this happens a second time, there will be a one-week dismissal (Five Activity Center days, not weekends). No refund will be given.
- No cellphones, iPods, Game Boys, iPads, etc. We are not responsible for these items if lost, broken or stolen. Individual Activity Center sites will determine if they want to have one day a week as a special day for these to be brought to the Center. Games must be appropriate. Fortnite is **not** appropriate.
- **No weapons (guns, knives, martial arts weapons, etc.)** We will follow BPS' guidelines and there will be a one-week suspension if caught having a weapon at Activity Center.
- We can't control the building's temperature. They do get warm during the summer months, especially with high temps over several days. Please dress appropriately.

## *Contact us:*

Most of our sites do not have a direct phone line for you to contact your child. If your site does have a direct number, that will be shared with you the first week. If you need to get a message to the leaders about your child, you can call the Park District office (222-6771) or the parent phone 220-3587 during Activity Center hours. We look forward to a fun summer with your child at Activity Center!

**Child's Name:** \_\_\_\_\_ **Activity Center Location:** \_\_\_\_\_

**Grade 2021-22:** \_\_\_\_\_ **Is Child attending Camp Ed?(Circle) Yes or No**

**Address:** \_\_\_\_\_

**Child's allergies (including medications, bug bites and foods):** \_\_\_\_\_

**What can we do if allergic reaction occurs:** \_\_\_\_\_

**Emergency Contact Information**

**\*\*\*\*\*Email Address:** \_\_\_\_\_

**(please print so we can read it)**

**Mom's name:** \_\_\_\_\_

**Dad's name:** \_\_\_\_\_

**Home:** \_\_\_\_\_

**Home:** \_\_\_\_\_

**Work:** \_\_\_\_\_

**Work:** \_\_\_\_\_

**Cell:** \_\_\_\_\_

**Cell:** \_\_\_\_\_

**Alternative Emergency contact-(you MUST have a name & number provided)**

**Name, phone #'s, relationship to child:** \_\_\_\_\_

**Name of child's doctor & phone #:** \_\_\_\_\_

**Which hospital do you prefer for your child?** \_\_\_\_\_

**Is there any medical information we should know about your child?** \_\_\_\_\_

**Parent's Signature:** \_\_\_\_\_

We are trying to prepare for any possible situations that could occur. Thank you for taking the time to fill this form out.

## Authorized/Unauthorized Pick up list

**Child's Name:**

**Activity Center Location:**

**Authorized** (please list all phone numbers)

[illegible]

**Unauthorized**

[illegible]



Activity Center Location: \_\_\_\_\_

## BISMARCK PARKS AND RECREATION DISCIPLINE PROCEDURE

### All Activity Center leaders will follow the described discipline

1. First Offense: Child receives verbal warning. It is explained what they have done wrong, why it shouldn't be done, and that it shouldn't happen again.
2. Second Offense: Child will receive a second verbal warning and a time out. Explain again what they have done wrong, why it shouldn't be done, and then they will sit out of activity for a short period of time.
3. Third Offense: Child receives a third warning and the parent will be called. The child is to be picked up **immediately**; they will sit in time out until the parent arrive. They are out the next AC day too.
4. If the behavior persists with the child, the next time (second) they are sent home it is for a full day again, a third time three days, if it happens a fourth time they are sent home for a week (5 AC days, not weekends). If it should happen again (a fifth time), they will be dismissed from the center for the rest of the summer, no refund will be given.
5. **Fighting, hitting or inappropriate physical contact of any kind will result in an automatic three day suspension.** (Fighting will be defined as: the actual or attempt to bully, intimidate, or harass another person that results in a physical altercation (ex. hitting, kicking, and shoving) between any Activity Center participant(s) or staff.) If this would happen a second time there will be a one week dismissal (5 AC days, not weekends. No refund will be given. If there is a third time, they will be dismissed from the program. No refund will be given.

\*\*\*\*\*In certain instances the first four steps will be skipped; these include destructive actions by the child, violent behavior where someone may be injured, and extreme cases of verbal abuse by a child to another child.

It is very important that you document ALL incidences of bad behavior in the incident record book, as well as on the child's behavior documentation form and have the parents sign the behavior form. Make sure that you enforce the rules on a regular basis. It is very necessary that I must stress to you the importance of documentation, and consistency of the rules. Make sure to talk to the parents about the incident.

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Child (ren)'s Name

\_\_\_\_\_  
Child's Signature

\_\_\_\_\_  
Date Signed

### PERMISSION SLIP TO LEAVE THE GROUNDS

Throughout the year there will be times that we will leave the school for walks to other playgrounds, to go on scavenger hunts, or just to take a short hike. It is necessary that we have a signed permission slip from the parents to allow their children to do this. These walks may not be decided on until the day of the session. Please sign below if it is all right that your child accompany us on these walks.

I agree to let my child leave the Activity Center grounds with the leaders and group.

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date signed

\_\_\_\_\_  
Child's name

Activity Center Location: \_\_\_\_\_

## Activity Center Hours

Parents/ Guardians-

**The Activity Center hours are 7:45am-5:30pm.** Please be advised not to drop your child/children off no earlier than 7:45am. The Activity Center Leaders will not be there to supervise your child/children before this time. Activity Center participants must also be picked up by 5:30pm. If you are not there at this time, your child may be left unattended until you arrive. We understand that there may be circumstances that cause you to be late. However, if this becomes a habit, your child/children may be dropped from the program without a refund. Our policy for Activity Center participants not picked up on time is as follows: first late pick up, a verbal reminder; second late pick up, a call from the program coordinator; third late pick up, a letter and a three-day suspension from the program; fourth late pick up, a one week suspension from the program, and fifth late pick up, the child will be dropped from the program without a refund. **Please abide by the 7:45 am to 5:30 pm** Activity Center schedule so that the program runs smoothly for all that are involved.

Cindy Gums

Activity Center Coordinator

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

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## CampEd Children

Parents/ Guardians-

If your child/ren are in the Bismarck Public School's CampEd program, we want to make sure they transition from the CampEd program to the Activity Center in a safe and timely manner. Please tell your child/ren to make sure they go directly to the Activity Center site after CampEd and report in with the leaders by 12:05pm each school day. They should not wander around in the school or out on the playground.

If you have a change in schedule or plans and your child will not be going to the Activity Center after CampEd on any given day, please contact the Activity Center office that day at 222-6771.

We would like you and your child/ren to sign below to ensure that this has been read and understood by both the parent and the child/ren and that this rule will be followed.

Cindy Gums

Activity Center Coordinator

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

**Child's Signature** \_\_\_\_\_





## Burleigh County Bookmobile

Dear Parents:

This summer the Burleigh County Bookmobile will again be visiting the Bismarck Parks and Recreation Activity Centers. In order for your child to participate, he/she **must have ONE of the following:**

- **Burleigh County Bookmobile card**

Name (First, Last, MI) \_\_\_\_\_ Library Card Number: \_\_\_\_\_

- **Bismarck Public Library Card**

Name (First, Last, MI) \_\_\_\_\_ Library Card Number: \_\_\_\_\_

- **Valid card from a Central Dakota Library Network (CDLN) member library (e.g. Morton Mandan)**

Name (First, Last, MI) \_\_\_\_\_ Library Card Number: \_\_\_\_\_

- **IF NONE OF THE ABOVE APPLY**, please fill out the library card application for your child below. A card will be issued on the bookmobile and your child will be able to check out items immediately.

### LIBRARY CARD APPLICATION

Name (Last, First, Middle Initial) \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (home) \_\_\_\_\_ (cell) \_\_\_\_\_ Notices via text? ☐ Yes! ☐ No!

Email Address: \_\_\_\_\_  
(Provide only if you prefer to receive notices via email and you are able to check your email on a regular basis)

4-digit PIN (Required to access your account and electronic resources online) \_\_\_\_\_

Date of Birth (month/day/year) \_\_\_\_\_ ☐ 12 and under (minor) ☐ 13-17 (minor)

Students— School: \_\_\_\_\_

Parent/Guardian (Print name): \_\_\_\_\_

Please **initial** and provide signature below.

\_\_\_\_\_ I agree that I am responsible for all materials checked out with this card.

\_\_\_\_\_ If materials are overdue, lost or damaged, I will pay for any fines that have accrued.

### Please read the statement below.

Bismarck Parks and Recreation is not responsible for any items checked out from the Burleigh County Bookmobile. It is the responsibility of the family to see that all items are returned on time and pay any fines for overdue, lost or damaged books. Any questions may be directed to the Burleigh County Bookmobile at 355-1491 or [kmcdonald@bismarcklibrary.org](mailto:kmcdonald@bismarcklibrary.org).

\_\_\_\_\_  
(Patron or Parent/Guardian Signature)

\_\_\_\_\_  
(Date)