

Please return this registration form to your child's teacher/school by: _____



Galaxy Youth Development & Targeted Services Programs

The Galaxy Youth Development Program provides youth in grades 6-8 a safe and fun place to be with friends after school, delivering recreational, social, educational, and enrichment programming. Unless otherwise notified, Galaxy operates from 2:37-5:00pm on full school days - it is not open when weather-related closures or any early release days are scheduled/occur. The first hour of each day is focused around education or enrichment, whereas the second hour's focus is social and recreational. During this first hour, some students may be part of a targeted service class based on a teacher identified need (Minnesota Statutes, section 124D.68, Subdivision 2). Typically, students in targeted services classes are in need of additional time and/or different experiences in order to further develop educational skills and abilities. The student can then use these new skills during the school day to support their school success. Targeted services is designed for meeting the needs of the whole child; therefore, it is not more of the same teaching and learning that occurs during the day, but a different approach to engage students with the teacher, school and community. This support is offered during the first hour of Galaxy.

Parent/Guardian Permission and Acknowledgment

Waiver: I understand that participation in this program and its activities is completely voluntary and that it is for the benefit of the participant. The City of Bloomington and Bloomington Public Schools shall not be liable for any claims, injuries or damages (of whatever nature) incurred by the participants which are directly or indirectly attributable to the negligence (passive or active) of the City, School District, its agents or employees. I also understand that the waiver includes any injuries that may result from the condition of the facilities used in the activity or program.

Data Privacy: The data supplied on this form will be used to enroll your child in a recreational, educational and/or social program and is required by the District for reporting, funding and operating purposes. Because some of the requested data is private, it is available to you, and the District staff who need this information to perform their duties, but it is not available to the public. You are not legally required to provide this data, but District staff may not be able to complete the registration and/or you may not receive updated information if basic information is not completed.

- ◇ Yes, Staff may take my child on walking field trips within the community and may transport my child in a district vehicle, operated by a Type III vehicle trained staff.
- ◇ Yes, Staff may take photographs and/or videos of my child during program activities. These photos, along with quotes, may be used for promotional purposes and or presentations.
- ◇ Yes, my child is allowed to watch PG 13 movies when special events are planned at Galaxy or on a field trip.
- ◇ Galaxy and Targeted Services programs are not responsible for lost or stolen items brought to the youth center by participants. We strongly encourage youth to leave valuable items at home or in their lockers.
- ◇ Staff, interns, and volunteers may collect evaluation data regarding the program and may ask my child questions about their participation in the program and how it has impacted them.

By signing below, I acknowledge that I have read and agree with the information on this registration form and that I am registering my child for the middle school Galaxy and Targeted Services Programs.

Parent/Guardian Signature: _____ Date _____

PLEASE COMPLETE BACK SIDE

Student Information

Student Name: Last: _____ First: _____ Middle: _____

Address: _____ City: _____ Zip: _____

Phone Number: _____ Birthdate: _____ Grade: _____

School Name: _____ Student ID #: _____

Important Student Medical Information/Conditions or disabilities?* (please describe any allergies, medications, disabilities, etc)
*all prescription & nonprescription medication to be given at school requires an order from your child's healthcare provider

Does your child need support for a medical condition/disability? (please describe)

Important Student Educational Information? (please describe)

Transportation

Galaxy operates from 2:37-4:45, with the first hour being Targeted Services programming for students who are referred and are eligible to participate. Please indicate transportation needs for both #1 and #2 below.

1.After Targeted Services (approximately 3:45pm)

- Parent/Guardian will pick-up child at school
- Child will walk home
- Child will attend Galaxy, then ride the 4:45 Activity bus**

2.After Galaxy (approximately 4:45pm)

- Parent/Guardian will pick-up child at school
- Child will walk home
- Child will ride the Galaxy Activity bus**
- N/A-leaving school after Targeted Services at 3:45

**The Activity bus leaves the middle school around 4:45pm on all days the program is open

Parent/Guardian and Emergency Information

Parent/Guardian #1: Relationship: _____

Parent/Guardian #2: Relationship: _____

Name: _____

Name: _____

Address (If different from student's)

Address (If different from student's)

Street: _____

Street: _____

City: _____ Zip Code: _____

City: _____ Zip Code: _____

Phone: (Daytime) _____

Phone: (Daytime) _____

(Evening) _____

(Evening) _____

Email: _____

Email: _____

Emergency Contact: (In addition to adults above)

Name: _____ Relationship: _____ Phone: _____