

Faulkton Area Out of School Program ~ Summer Contract/ Liability Agreement 2025
MAIN BUILDING – 109 13th Ave North

Child Information:

Full Name _____ Nick/ Preferred Name _____

Date of Birth ____/____/____ Anticipated Start Date for your child _____

Contracts for Service: Contracts are completed twice a year; prior to the start of the Summer program and prior to the start of the School Year Program. **Contracts can be modified by giving at least a two-week written notice to the program director.** We require payment for program usage by the 20th of each month or as indicated by your agreed payment schedule below. Contracted participants will receive a monthly e-mail bill for their usage of the program on or before the 10th of each month. If a child attends the program more than their contracted days – the walk-in rate will be charged. Payment will be collected up-front for all walk-ins or special activities without an active contract.

Current Fee Schedule: The program operates the following weekly fee schedule but does not charge for days it is closed for health, holiday, or weather reasons. The program allows walk-in participants as space permits.

Current Fee Schedule is as follows:

A Registration Fee of \$40 is required for all Contracted Children (Max \$80 family). This fee covers activity/transportation costs. **If you disenroll your child and re-enroll them, you will pay the registration fee again.** No registration fees are charged for Walk-in or Special Event participants.

7:30am-6:00pm	Contracted	First Child	Additional Children	Walk-in
	2 days/week =	\$50/week	\$46/week	*\$30/Full day (> 5 hours)
	3 days/week =	\$72/week	\$66/week	*\$20/Half day (≤ 5 hours)
	4 days/week =	\$92/week	\$84/week	*Pool admission, field trips costs
	5 days/week =	\$110/week	\$100/week	are included in drop-in price

Sorry – no 1/2 day rates for contracted children
 Breakfast, Lunch, and Snacks are included in the program cost.

Payment Information Continued

***Please Note: Families are allowed one week (equivalent of contracted time) of Vacation in the summer and one week in the school year. Vacation requests are to be communicated with the PROGRAM DIRECTOR in writing at least 3 days in advance. Handwritten notes, text messaging, and emails will be accepted forms of communication.**

Days contracting service for: Please Circle *Note: If participating in a special program – circle Walk-in.*

2 days/week 3 days/week 4 days/week 5 days/week Walk-in

Circle the days your child will normally be in attendance:

Monday Tuesday Wednesday Thursday Friday Varies

If you marked "Varies" - Please visit with the program director to discuss your situation or explain below:

Your monthly fee will be due on the 20th of the following month. **Invoices are only emailed once-a-month** but you can make payments weekly, bi-weekly or monthly.

If you have any questions or concerns regarding this contract, please discuss this with the Program Director. 605-751-9043

Signed _____

Date _____

Printed Name _____

(Please fill out waiver on reverse side)

READ EVERY LINE

Faulkton Area Out of School Program Handbook Acknowledgement and Waiver Agreement

In consideration of my child's participation in the Faulkton Area Out of School Program, I agree to the following:

1. I acknowledge that I have received a paper or electronic copy of the current program handbook that outlines all policies of this program. I understand that the handbook has more policies and that all policies are explained in greater detail than what is indicated in this waiver agreement. I acknowledge that I have read this handbook and that I understand and will honor all policies as set forth.
2. I understand that a group texting service called "Group-Me" is used to communicate program happenings with parents/guardians. Enrolling my child into the program permits the director to enroll the parents' contact information into the 'group me' service. I agree to use this text service for the best interest of the program and will keep in mind that it is a 'group' text and if I have a message that needs to be sent to the program director alone, I will remember to send it to their private number.
3. I agree that I will pay all current charges by the 20th of each month or as agreed upon in my preferred payment schedule, including additional day and late fee charges. Failure to follow said policy could result in additional fees and or dismissal from the program.
4. I understand that if I contract for services, I am allowed one week of vacation/extended illness absence during the school year and one week during the summer with advanced notice. I will notify the program director in writing within a timely matter (preferably at least 3 days' notice for vacations and as soon as possible for illness). I will indicate that I want vacation credit applied and will not assume the director knows this information.
5. I agree that I will pick up my child/children no later than **6 p.m. each day**. I understand that it is my responsibility to provide an alternative arrangement for the picking up of my child/children if I am unavailable. I understand that disregard of said policy could result in additional late charges and suspension or dismissal from the program.
6. I understand that due to liability issues, the program staff cannot administer medications without having written consent from the parent/guardian. All medication needs to be in its original container and labeled with that child's name with clear instructions on dosage.
7. I understand that if my child has a known medical condition, I have notified the director of what to do if a problem should occur during program hours. I also understand that if my child has any one of the following conditions, I will be required to pick up the child immediately: Contagious Disease, Fever over 100 degrees Fahrenheit, Vomiting or Diarrhea, Accident Requiring Medical Attention.
8. I understand that ages 5 and older will be required to purchase a separate pool membership or the daily pool pass amount will be added to my monthly bill in the summer months and I agree to pay any additional fees associated with outside organizations (baseball, softball, cheerleading camp, youth golf, swimming lessons, etc.), throughout the year with the exception special activity instructors – which will be paid for by program fees as determined by the program director. Parents will be notified in advance of what programs are covered and not covered with contract fees.
9. I understand that additional program fees for special events may be added to my invoice if my child participates. Parents will be notified of any additional fees via group messaging before signing the child up for the event or activity. (i.e. dance costumes, carnivals, special events)
10. I also understand that the program participates in supervised walks, and outdoor and indoor play and I give permission for my child to take part in these activities each day of the program. I also understand that the program will involve periods of physical activity in which my child will be expected to participate to the best of their ability. Any physical limitations and expectations should be communicated with the program director.
11. I understand that the children may be bussed to events, field trips, and activities. This is a complimentary service provided by the program and the children will be expected to follow bus rules and behave appropriately.
12. I understand that at times, an activity will be scheduled that requires transportation by private vehicle. Parents will be notified in advance of such activities. I permit the program to transport my children via volunteers or staff in a safe manner by vehicle to said functions.
13. I also give the program permission to photograph my child for media purposes. At times, news articles and information will be printed or submitted to newspapers or other community publications/media/social media for advertising and promotion of this program.
14. I understand that it is the program's policy to apply sunscreen to all children when outdoor activities take place and to use bug spray when warranted. I give the program permission to apply sunscreen and bug spray to my child. If my child has allergies or sensitivity to either product, I understand that I will have to provide an alternative product (sunscreen must be SPF 30 or higher) to use in its place.
15. In an emergency, I give my permission to the program staff to have my child treated by medical personnel. The staff member in charge shall make reasonable attempts to contact me before and during emergency medical treatment.
16. In consideration of my child being allowed to participate in this recreation program, I agree to assume all risks of such activity and hereby release and hold harmless Faulkton Area Out of School Program and their agents, employees, instructors, and student interns from all claims, suits, losses, or causes of action for damages, for injury or death, arising out of or related to my child's participation in the youth recreation program.

I have read the foregoing carefully and I understand its content. Any questions that may have occurred to me concerning this liability waiver have been answered to my satisfaction.

Parent/Guardian Signature _____

Date _____

(OVER)