Dripping Springs ISD Community Services

CLUB C.R.A.S.H. 2016 - 2017

COOL READING/ACTIVITY & STUDY HALL BEFORE SCHOOL PROGRAM FOR GRADES 6TH-8TH

WHAT IS CLUB C.R.A.S.H.?

Club CR.A.S.H. is a before school program, serving students in Grades 6-8.

WHERE WILL CLUB C.R.A.S.H. BE HELD?

Club C.R.A.S.H. will be held in the Middle School. (Room to be determined.) Students will not be allowed to leave after signing in. Transportation is not provided for this program.

WHAT ARE THE DAYS OF OPERATION?

Club C.R.A.S.H. is in session each day that school is in session. The hours of operation are 6:45 - 8:15am. This program DOES NOT operate on school holidays.

WHAT ARE THE COSTS?

Registration fee (non-refundable/non-transferable) is \$50 per child per year. (Early Registration is \$35, if received on or before July 15th.) The monthly fee is \$85 based on an annual daily rate divided into 9 equal payments, with the first payment due by the first day of school covering August and September. Fees are due in the Community Services office on the 1st day of each month. A \$20 late fee will apply after the 5th school day of the month. Drop-ins are \$10 per day. Pre-payment is required. Credit Card authorization can be kept on file for automatic withdrawl. Payments may also be made online through the Community Services Webstore Parent Portal at: http://drippingspringsisd.revtrak.net

ARE THERE ANY MONTHLY FEE DISCOUNTS?

Reduced Lunch Program 20% Disc. Free Lunch Program 40% Disc.

HOW DO I ENROLL MY CHILD?

A new registration must be completed each year for each child in the program. Please follow the link provided, **http://drippingspringsisd.revtrak.net.** From this location please select School Age Programs, Before and After School Child Care.

WHAT DO THE STUDENTS DO?

Students are encouraged to read, participate in a variety of activities, study, work on school projects, or rest until it is time for breakfast! They will also receive a full breakfast tray, prior to reporting to their first period class.

PICTURE/VIDEO RELEASE AGREEMENT

Student and Parent/Guardian release to Dripping Springs ISD the student's name, picture, art, written work, voice, verbal statements, portraits (video or still) and consent to their use by DSISD. DSISD Community Education agrees that the student's name, picture, art, written work, voice, verbal statements, portraits (video or still) shall only be used for honoring students, public relations, public information, school or district promotion, publicity and instruction. Student and Parent/Guardian understand and agree that: No monetary consideration shall be paid; Consent and release have been given without coercion or duress; This agreement is binding upon heirs and/or future legal representatives; The photo, video, student name, art work, written work, or students statements may be used in subsequent years. DSISD has no control of media use of pictures/statements which are taken without permission.

BILLING, ABSENCES, SCHEDULE CHANGES, OR ANY OTHER QUESTIONS: Contact Kim Hatcher at (512) 858-3022 or Email at kim.hatcher@dsisdtx.us

Dripping Springs Independent School District does not discriminate on the basis of race, color, national origin, age, sex, or disability in its employment, practices, activities and programs. El districto independiente de la escuela de Dripping Springs no discrimina en base de la raza, del color, del origen nacional, de la edad, del sexo, o de la inhabilidad en su empleo, prácticas, actividades y programas.

Club C.R.A.S.H. Registration Form

| Start Date | | | 2016 - 2017 Grade | | | | |
|--|---|---|---|--------------------|----------|-------------------------|-----------|
| | Please ✓ the program your child will participate ☐ 6:45 - 8:15am ☐ Drop - In | | \$85 per month (9 equal payments) \$10 per day (purchase in increments of 3) | | | | |
| Students Name | | D.O.B | | Sex | | | |
| Addres | SS | Ci | ty | | State | Zip | |
| | | s, medications, physical con | • | | | = | |
| Account Holders Name | | Relation | | Email | | | |
| | | | Cell # | | | | |
| Contact 2 Re | | Relation | Hom | e# | | Cell # | |
| Are you | u or your spouse a full-tir | ne employee of DSISD? | YES | NO | | | |
| Emergency Contact Relation | | | Work # | | Cell # | | |
| | Club C.R.A.S.H. is part of | nave read and understan of the Dripping Springs Sch fee (non-refundable, non-ti | ool District a | and follows its po | olicies. | ion. If registered on o | or before |
| | July 15th, the fee is \$35 after July 15th the fee will be \$50. The monthly fee is \$85 payable to "DSISD" on the first school day of each month. Fees are not pro-rated. A \$20 late fee will be applied to my account if payment is received after the 5th school day of each month. | | | | | | |
| ☐ 3. ☐ 4. | | | | | | | |
| | | | | | | | |
| ☐ 6. DSMS Dress Code and Student Code of Conduct will be enforced. | | | | | | | |
| □ 7. | To be eligible, students must be registered in Dripping Springs ISD, grades 6th-8th. I have read and agree to the Picture/Video Release agreement on front of form. | | | | | | |
| | I authorize the Dripping Springs ISD, its employees and agents to transport me or my child(ren) to the hospital, doctor, or dentist in the event of an injury or accident, I agree to assume all medical costs incurred. I further release Dripping Springs ISD, its employees and agents from all claims and responsibility for physical injury and property loss. | | | | | | |
| Paren | t or Guardian Signatui | ·e | | Da | te | | |

Please consider our automatic payment system to eliminate the risk of late charges.

Register online at http://drippingspringsisd.revtrak.net or

Submit paper registration to: Dripping Springs ISD Kids Club, P. O. Box 479,

510 W. Mercer St., Dripping Springs, Texas 78620 Phone: (512) 858-3021 Fax: (512) 858-3099