

Medication Name:

# LAKESIDE UNION SCHOOL DISTRICT EXTENDED STUDENT SERVICES 2022/2023 REGISTRATION FORM



Stuc	dent Name:		DOB.						
	de: School: <u>Lindo Park</u>	AM Only PM Only							
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	lent Name:		_ DOR:						
Grad	de: School: <u>Lindo Park</u>	AM Only	PM Only	вотн					
Stuc	dent Name:		DOB:						
Grad	de: School: <u>Lindo Park</u>	AM Only	PM Only	вотн					
	RESPO (Are financially responsible, have ful	NSIBLE PARTY (S)		ndates)					
	[1] Responsible Party 1:			•					
ctss									
conta	Phone [1]:								
red c	Address:								
<mark>nbel</mark>	E-mail Address Required:								
nur	[2] Responsible Party 2:		Relationship:						
er of	Phone [1]:	Phone [2]							
) ord	Address:								
be ir	E-mail Address Required:								
Will	Emergency Pick-Up Information: Person(s) authorized to pick up (includes above)								
tion	[3] Name:	Relatio	nship:						
Pick up or notification will be in order of numbered contacts	Phone [1]	Phone [2]							
r no	[4] Name:	Relationship:							
o dn	Phone [1]								
Pick	[5] Name:	nship:							
	Phone [1]								
	ne line below, indicate any medical / beha or that would limit your child's activities -								

ESS Programs operate as an extension of the school day and all School Rules will be enforced during the program hours. Students receiving three (3) disciplinary notices may be suspended from their current program for up to 1 week. A fourth (4th) notice may result in exclusion from all ESS Programs for the remainder of the current school year, including seasonal camps. Depending on the seriousness of the incident, a single day or immediate exclusion may be enforced. The school principal will also be notified of all incidents; further school discipline may occur.

Children are to be accompanied to and from the center and are logged in & out on the computer as well as, signed in and out on the daily roster by an authorized adult. Check parent files daily for correspondence & notices. If someone, is not listed on the registration form, and will be picking up your child, the center must receive authorization in writing prior to pick-up. The authorized adult will need to provide proper identification. Emergency information is to be updated when necessary.

In signing below, you acknowledge your understanding of the district policy and legislative intent regarding late arrival or early release from the Extended Student Services Programs at Lindo Park Elementary according to the reasonable excuses listed on the back of this registration form. You also understand your child should attend the program the full day, every day. Children will always be released to authorized adults who sign them out early on the daily attendance sign-in sheet stating any of the acceptable reasons for drop off or release. It is mandatory that an Early Release or Late Arrival form be on file and current at all times. Repeated violations of the Late Arrival / Early Release policy will result in the student being removed from the FREE program and placed on the waiting list or on the tuition based program

An annual non-refundable fee of \$50.00 (\$25 each additional child) is due at registration. A late pick-up fee of \$1.00 per minute will be charged after center closing and is due at the time of pick-up. A fourth (4th) late pick-up will constitute exclusion from all Extended Student Services programs. Any child (children) not picked up by 6:30 p.m. will result in the Sheriff Department being called to pick up said child (children).

Any tuition left delinquent after the 20th including declined auto pay payments, will result in children being excluded from the program until the delinquency is cleared. Repeated offenses will result in exclusion from all Programs – Including Seasonal Camps. In the event of being excluded from the program, your child may be placed on a waiting list to await availability of space.

I understand that participation in ESS Program will include outdoor activities, and all the risks that accompany such activities. In case of emergency, staff will contact parent/guardian or an emergency contact provided in order of contact. If immediate hospital attention is needed, staff will call 911. I understand that I will be held responsible for all costs incurred. I therefore waive any claims and agree to release and hold harmless this program, its employees or agents.

I have read, understand, and agree to abide by all of the above statements:

Date

\*\* Please refer to reverse side for information regarding our Photo Release Policy \*\*

For Office Use Only:

Before ESS can administer any medication, a completed Physician's Statement form must be on file

Approx. Time:



# LINDO PARK ELEMENTARY Early Release Policy 2022/2023



## LP ELEMENTARY PROGRAM HOURS

M,T,TH,F - 2:10 p.m. - 6:00 p.m. Wed. - 12:10 p.m. - 6:00 p.m

# LP ESS PROGRAM EARLY RELEASE HOURS

MUST PICK UP AFTER 4:15 p.m. on M/T/TH/F After 3:15 p.m. on Wednesdays

# Attendance and Early Release Policy

In accordance with the California Education Code Section 8483(a)(1)(2)(3), the following attendance and early release regulations for the After School Education and Safety Program (ASES) are required. A periodic review of attendance will be conducted to ensure priority enrollment aligns with Education Code and is given to students who attend daily.

### **Elementary School Students**

"First priority shall go to pupils who are identified by the program as homeless youth, as defined by the federal McKinney-Vento Homeless Assistance Act (42 U.S.C. Sec. 11434a), at the time that they apply for enrollment or at any time during the school year, to pupils who are identified by the program as being in foster care, and to pupils who are eligible for free or reduced-priced meals" [EDC 8483(c)(1)(A)].

It is the intent of the California Legislature that elementary school pupils "participate in the full day of the program every day during which pupils participate" [EDC 8483(a)(2)].

If an elementary school pupil is unable to attend the after school program for the full range of hours every day, the parent/guardian must complete and submit for approval a request for early release specifying the days and hours the pupil will attend and the reason(s) for requesting early release [EDC 8483(a)(1)(B)]. Non-compliance with the attendance and early release policy may result in disenrollment from the after school program.

# **IMPORTANT PLEASE READ & COMPLETE**

# IF YOUR CHILD IS LEAVING BEFORE 5:30PM, YOU MUST COMPLETE THE PORTION BELOW

## Reason(s) for Requesting Early Release

1. Parallel Program	2. Family Emergencies	3. Family Needs	4. Medical Appointments
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<ol><li>Weather Conditions</li></ol>	<ol><li>Medical Emergencies</li></ol>	<ol><li>Other Condition</li></ol>	ons 8. Transportation

Date Range	ER Reason	Mon	Tues	Wed	Thurs	Fri	Parent/ Guardian Signature	Date of P/G Signature	Program Leader Initials
Example: 08/22/22-6/14/23	1. Parallel Program- Sports Activity	5:15pm	n/a	5:15pm	n/a	n/a	Jane Doe	8/2/22	

## **ASES Authorization for Early Release**

By signing below, I am acknowledging the intent of the California Legislature and the California Education Code; I attest that the Early Release authorization information is true to the best of my knowledge and I am aware of potential consequences associated with non-compliance of the ASES attendance and Early Release requirements.

Parent/Guardian signature:	Date:
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# Lakeside Union School District Student Technology Acceptable Use Policy

Students and parents/guardians agree to:

- 1. Engage in activities that are lawful and school-appropriate.
- 2. Avoid accessing, posting, submitting, publishing, and/or displaying all inappropriate material, such as those that are threatening, obscene, sexually explicit, or harassing. In addition, students will not use the system to promote the use of drugs, alcohol or tobacco.
- 3. Show respect for others by not engaging in cyberbullying, and reporting any cyberbullying posted on the Internet, social networking sites, or via other digital technologies such as text messaging.
- 4. Follow copyright laws by only using work, files, and programs to which permission has been granted.
- 5. Keep passwords private and secure at all times.
- 6. Take proper care of district equipment. Vandalism will result in the cancellation of user privileges. Vandalism includes the intentional uploading, downloading, and/or creating computer viruses and/or any malicious attempt to harm or destroy district equipment, materials, or data of any other user.
- 7. Report any security problems or misuse of services to the teacher, principal, or ESS staff.

The principal or designee shall make all decisions regarding whether or not a user has violated these regulations and may deny, revoke, or suspend a user's access at any time. The decision of the principal or designee shall be final.

Parent/Guardian Signature:	Date:

## **LUSD Photo Permission Form**

The Lakeside Union School District communicates with parents, students, and community members through a variety of methods. Online communications, to include the district and school websites (www.lsusd.net), Instagram (@lakesideunion) and Twitter (@LUSDInnovat\_Ed), provide a convenient way to stay connected to school events, classroom learning, and important information.

Photographs and/or digital recordings of students are taken periodically in the classroom or at school functions to be used in both online communications and print materials, such as class bulletins, promotional materials, and art projects. To protect student identity, **student names are not used** unless specific permission is obtained for a special purpose.

This consent form grants the Lakeside Union School District permission to publish photos and/or student artwork. I release the Lakeside Union School District and its employees, officials, and agents from any liability of any claims, including without limitation, claims for libel, defamation, invasion of privacy and right of publicity, and infringement of proprietary rights, arising out of or relating to the exercise of rights granted under this consent and release.

This permission stays in effect unless a request in writing is made to the principal or designee that access be revoked.

l give permission to publish photog	YES	NC	
Parent/Guardian Signature:			
Date:	School:		



# LAKESIDE UNION SCHOOL DISTRICT EXTENDED STUDENT SERVICES 2022/2023 AUTO PAY FORM



We are excited to offer the safety, convenience and ease of Tuition Express® - a payment processing system that allows secure, on-time tuition and fee payments. Payments are made from either your bank account or credit card.

STUDEN	II NAIVI	E:									
Program:	OUT OF DISTRICT	LEAPP	EH	LC	LF	LP	LV	RV	WG	LMS	TDS
Charge	Monthly	on the 10th -	PREFERRE	METHOD	1						
Date:	Other:										
Charge Amo	ount:	Balance Due (	Balance from	monthly tuiti	ion and/or c	camp charges)					
		Specific Amou	nt:								
ANK ACCT. OR	CREDIT CARD	ON FILE WITH ES	SS ALREADY:	YES (i	f yes, sign,	date & stop)	NO (if	no, complete	the rest of	this form)	
YES, sign here	to acknowled	ge the new charg	ge dates: Pare	ent Signature	e:					Date:	
referenced of Program will a portion of Payments w failed payme (2) week with responsibility school year Advantages	on the back I be absorbithe fee in the feet of	er Credit Card	edit card fe my underst rization dat ttempts, at consibility t d information	B). There e. I underst anding that the or the but which time to cancel the on - expirate	are <b>no ac</b> tand that incept the transfer that incept the transfer that it is a like the transfer that is a like the transfer that is a like transfer	dditional c f I sign-up for tion will be ay immedia contacted. I rization in v , address, i	harges for credit care saved on fil tely followir can cancel writing to sinew card, e	ACH trans d charges I e, for future ng a weeke this authori emers@lsu tc. A new f	may be re transaction and or holion zation at a usd.net. I orm must	As of now the sponsible for ons on my a day. In the earny time, with understand in the complete	ne ESS paying ccount. event of a two it is my ed each
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# **SECTION B (Credit Card)** Cardholder Name Phone # Cardholder Address City Account Number CVV Number (3 digits on back of card) **Expiration Date** Cardholder Signature Date In addition to your two (2) week written notice of cancelation, you must complete the bottom portion of this page: I no longer authorize Lakeside Union School District to initiate automatic debit or credit card charges. I have written and attached my notice of cancelation.

Card Holder Name (Please Print)

Card Holder Signature

Date

Staff Signature Acknowledging Cancellation