Autism Charlotte

Extended Learning & Development Program

Parent/Guardian Handbook

Updated 08.01.2018

Welcome

The Autism Charlotte (AC) Director of Programs, Extended Learning and Development Program Supervisor, and all of our AC staff are delighted that you have chosen your child to be a part of this program. We are confident that your experience will be a rewarding one. Autism Charlotte and the program coordinators are here to assist and support you during your child's enrollment in the Extended Learning and Development Program.

This handbook contains current policies and procedures along with expectations of both parents/guardians and staff. We will provide updates as they occur. We hope that this guide will be helpful to you. Please feel free to contact Autism Charlotte with any questions you may have.

History and Philosophy

Autism Charlotte is a local 501C3 founded in 2006 by 5 families all personally impacted by autism. The Extended Learning & Development (ELD) Program was developed in 2008 by Autism Charlotte (AC). With the support of our community partners, YMCA of Greater Charlotte (YMCA), CMS Schools and CMS ASEP, we have collaborated to provide children with autism many benefits, including inclusion, socialization, communication and life skills. At the time, there was no other after school program which served children on the autism spectrum.

The intent of Autism Charlotte in designing this program was to provide yet another way parents/guardians could help their children flourish, learn and continue to move toward a more independent, productive life. Since its inception, the ELD program has grown to incorporate a summer camp component in addition to the academic year program.

Mission and Goals

AC is unique among those that serve the autism community in that we focus our efforts on creating inclusion-based opportunities and programs for children with autism spectrum disorders.

Our mission is to help children with autism achieve their full potential and our vision is to be a leader in transforming Charlotte, to becoming a model autism community for the support and inclusion of people with autism. To achieve our goals, we provide inclusion-based programs and services that support children with autism and their families.

The core values of our organization are Inclusion, Empowerment, Individual Achievement, Community Impact, Collaborative Partnerships, Programmatic Innovation and Financial Stewardship.

Procedures

Admissions/Enrollment
Autism Charlotte will not discriminate based on race, color, sex, national origin, creed or special needs.

1. Participants must have a current IEP or recent documented diagnosis
2. In order to register, participants must submit an application, registration fee (where applicable), and all signed waivers
3. Participants must be between the ages of 5-21 years of age
4. Participant's behavior must be manageable within the scope of supervision that the ELD program can provide
5. Participants must be exempt from any health care needs that our staff are not trained for
6. Immunization records or Exempt Waiver form may be required, based on location
7. Payment must be made in accordance with Autism Charlotte policies and procedures
8. The Autism Charlotte Director of Programs and Program Coordinators, will make the final determination of those whom this program is most appropriate. This will be based on the documentation that is received and professional observation

Ratios Our ratios of teachers to children with autism are as low as 1 to 3 and up to 1 to 5 based on age and the needs of the children served. We also utilize college interns for additional support, as needed.

Staffing Lead Teachers hold a 4 year degree in Special Education or a similar field and has experience working with individuals on the autism spectrum. Teachers have a minimum of 2 years' experience working with individuals on the autism spectrum, post-secondary education or degree a plus.

Training & Supervision ELD staff obtain 24 pre-service training hours and 16 annual in-service hours. Core trainings focus on autism diagnosis, signs and symptoms, common characteristics, best practices, incidental teaching, inclusive willingness and applying inclusive practices; and include certifications in CPR, First Aid, AED, Medication Administration and Crisis Prevention intervention (CPI). ELD staff are supervised and trained by a Program Coordinator and the Director of Programs. Supervision consists of educational and behavioral advisement, on-site coaching and collaboration, and continual evaluation of processes and procedures.

Absenteeism
If for any reason your child will not be attending ELD please contact the ELD Coordinator or teacher for your location either by phone or email by 12pm. This will minimize delays at school regarding transportation and increase the safety of your child. Please provide the following information in your message; child's name, date of absence, child's school and grade and whether or not they ride a bus to ELD

Transportation Autism Charlotte does not provide transportation.

Program Operation

The hours of the ELD Program vary by location. The ELD program follows the CMS calendar and will honor all major holidays, teacher work days, early release days and vacation days.

School out Days:

Full Day care is not provided for holidays or school vacation days. All sites will be open extended hours on Early Release Days. Teacher Work Days (TWD) are optional for a fee. CMS site locations will be open 6:45 AM-6:00 PM and YMCA sites will be open 7:30 AM-6:00 PM (please note the earlier pick up time). TWD will be available at sites with a minimum of 4 registered participants (maximum of 12 participants per site). Registration for the TWD and the fee are due a minimum of two weeks prior to the service day.

Inclement Weather Policy:

In the event of school closings due to inclement weather, the AC Director of Programs will assess the road conditions based on the weather report. The safety of our staff and participants is our #1 priority. If the school systems close, the evening before, the ELD program will not be open. In the event of EARLY RELEASE FROM SCHOOL DUE TO INCLEMENT WEATHER WE WILL NOT be open.

Late Pick-Up Policies and Procedures:

We will not leave a child unattended. A staff member will remain with the child until a parent/guardian or emergency contact, arrives. A **$1.00 per minute will be charged for every minute that a child remains after the day has ended**.

Chronic late pick-up may be grounds for dismissal from the program

If a child is not picked up within 30 minutes of the close of the program and all attempts to reach all authorized persons and emergency contacts have been exhausted, local authorities will be contacted.

Custody Issues

In cases of separated or divorced parents where visitation rights are denied to one parent, we cannot deny releasing the child to such parent unless a court decree or separation document is in our file expressly forbidding such parent from picking up the child from our program, or from picking up at times not allowed by the decree. The court decree must also be specific to the rights of visitation on the property during ELD hours. The court document must specify in writing that visitation is permitted by the non-custodial parent. Otherwise, visitation will not be permitted.

Under the Influence

Your child's safety is our first priority. At times we are called to make judgments concerning their safety. If AC personnel believes that a parent/guardian is under the influence of drugs or alcohol when they arrive to pick up their child, we will help arrange an alternate plan for the transportation of the child and his/her parent/guardian.

Emergencies

In the case of emergency, every effort will be made to reach you or the emergency contacts listed on your information sheet. If no one can be reached we will take the necessary actions for the health of your child. If anything other than basic first aid is needed our first course of action will be to call 911. Should there be any changes in the emergency contact numbers, please notify us immediately.

What to bring

Participants should dress appropriately for the weather and wear closed toed shoes for active play. A hat or cap for sun protection is advisable. An extra set of clothes should be sent at the beginning of the ELD program and will be kept at the ELD site. Appropriate undergarments (pull ups, underwear) are also required to be accessible and remain consistently stocked. Parents/guardians are expected to replenish all clothes within 24 hours.

Shared Responsibilities

Personal responsibility and group cooperation are important elements of the ELD experience. Mature, caring staff work with participants on the importance of caring for one's personal belongings, assisting in daily clean up, and pitching in on general tasks known as "shared responsibilities." We strive to imprint these characteristics on each child so they will carry over to his/her home and school.

Health and Safety Guidelines

Autism Charlotte cannot provide care for sick children. A child who is sick before the program begins should be kept home for his/her own sake and that of others. Each day upon arrival, each child will be observed for symptoms of illness. If a child has no overt symptoms of illness, but displays significant behavior changes and is clearly uncomfortable and not able to participate in activities or if a child becomes ill during the program, all attempts will be made to contact the parent/guardians. If a parent/guardian cannot be reached, the staff will call emergency contacts.

Refunds are not provided for missed days due to illness.

If your child has any of the following symptoms they should not attend the ELD program:

- ☐ Nose that runs constantly
- ☐ Undiagnosed rash, sore or other Skin condition
- ☐ Fever (100 degrees F or higher)
- ☐ Excessive coughing
- ☐ Any other contagious symptom
- ☐ Vomiting
- ☐ Sore Throat
- ☐ Pink Eye
- ☐ Head Lice
- ☐ Diarrhea

A child must be fever free and no diarrhea and/or vomiting for a full 24 hours before returning to the program. In some cases a physician's note may be required before allowing your child to be readmitted.

Policies

Bathroom Policies

We understand that individuals within our program may have delays in the area of bathroom independence and/or may have dietary or medical needs that increase their bowel production. Should an individual require more assistance on a consistent basis than what staffing ratios permit, the individual would not be permitted to remain in the program without parent/guardian-provided 1:1 assistance.

Medication Policy

AC strives to provide your child with the best and most accurate care possible. AC staff are trained in CPR, First Aid and AED. At this time, we are unable to provide any additional medical care unless it is to administer life-saving medications such as epinephrine, albuterol or other prescribed and documented life-saving medication. Anyone who requires such a medication will need to complete a medication administration and authorization form upon registration or if the medication is prescribed during program enrollment.

Behavior Management Policy

We believe that by incorporating a positive educational environment, redirection, preventative measures and positive reinforcement we can provide the best experience for you child. We believe that we can best implement these polices by incorporating the following behavior management strategies.

- Structured daily activities
- Small groups sizes and teacher to child ratios
- Consistency of routine/schedule
- Reasonable limits set for all participants
- Staff training on autism and applicable behavior management techniques
- Individualized behavior plans, as needed

In the event that a participant continues to exhibit severe problem behavior and none of the appropriate behavior management techniques are effective, the parents/guardians and AC Program Director and ELD Coordinators will meet to discuss the situation and determine the best course of action with appropriate documentation. Following the meeting if the recommended course of action does not resolve the problem behavior AC may terminate the child's participation for the reasons below:

Dismissal from the Program

Autism Charlotte reserves the right to request withdrawal of a participant if one or more of the following conditions exist:

1. The participant is not participating in or benefiting from the program.
2. The staff cannot provide adequate or safe care for the participant.
3. The staff cannot provide adequate or safe care to other enrolled participants due to the care needs or behavior of one participant.
4. Child's behavior endangers the safety or health of other children.
5. Parent/Guardian's lack of cooperation in the effort to resolve the behavior problem.
6. A determination by the Director of Programs that the program is not in the best interest of the child.

Please note: There is no financial compensation/refund for time missed due to behavior problems.

Continued Participation and Withdrawal Policy

Children who are selected to participate in the Extended Learning & Development Program (from here on will be referred to as the "Program") must be able to integrate into the Program in a 1:3 to 1:5 ratio. It is recognized that on any given day a child may need extra support. However, if a child requires direct attention or supervision on an on-going basis for safety, learning or behavioral reasons (which must first be documented by the Program staff), the parent/guardian will be responsible for providing a familiar 1:1 adult (age 18 or older) to shadow the participant during all hours in which the participant is present at the Program. If the family is unable to provide an additional staff, the Director of Programs would withdraw the child from any further participation in the Program.

If the family does provide a familiar 1:1 adult shadow for the child, that person must complete a Volunteer form and consent to a background check. The child and the 1:1 shadow would be allowed to participate in the Program once all the paperwork and background checks were submitted and cleared.

If the child, accompanied by their 1:1 familiar adult shadow, is still not able to participate in the Program, its schedule and modified activities, due to behavioral or safety concerns, the child may be asked to withdraw from the Program.

This policy is intended to ensure the safety and positivity of the Program and all its participants.

Insurance

AC provides liability insurance on all its programs. It is the program participant's responsibilities to provide their own accident insurance coverage. Parents/guardians include their personal health insurance information on the space provided on the registration form. This information will only be used to facilitate outside medical treatment if required. In the event of serious illness or accident, the parents/guardians will be notified at once. Parents/guardians/guardians are responsible for prescriptions and charges incurred for outside medical treatment of their child, should services be required while in attendance. Parents/guardians will be financially responsible for intentional damage to any equipment and/or facility caused by their child.

Financial Assistance

Autism Charlotte offers financial assistance through scholarships at our ELD Programs. We strive to give every child the opportunity to enjoy the benefits of our programs, regardless of their financial situation. If you are interested in obtaining a scholarship, please contact the Director of Programs, Sarah Nolin at (704)-910-4512 or email at snolin@autismcharlotte.org. Registration fees (if applicable) are not discounted and are due at time of registration.

Payments and Fees

Registration Fees

All registration fees are due with the application and waivers. The fee is paid prior to entry into the program, and again for any re-entry throughout the academic year or summer program. The registration fee is non-refundable and applies to new families or those not currently enrolled in the ELD Program.

Program Fees

Program fees include all regularly scheduled program days, and early release days (during the academic year). The full fee is due regardless of the number of days a student attends. If a holiday, non-program day, or snow day occurs on a usual fee collection day, an extra day of fee collection will be added without penalty.

Payment Methods

All fees may be paid via debit/credit card, ACH bank transfer or check. Cash will not be accepted. Fees can be paid on a monthly or weekly schedule. Fees may be paid in advance for any period of time. Enrolling in auto-draft payments will ensure that your fees are always paid on time. Payments can also be made via telephone or in person during business hours Monday-Friday from 9am-4pm.

- Fees paid monthly will occur on the first day of the month prior to service. If fees for the month have not been paid by the 7th, a $10 late fee will be added to your balance.

- Fees paid weekly will occur in advance; on the Monday prior to the week of care (unless your child is absent from school). If fees for the week have not been paid by Friday at 6:00 PM, a $10 late fee will be added to your balance.

Transaction Fees

A $3.00 transaction fee is charged for each credit or debit card transaction. There is no fee for ACH bank transfers or checks. However, a $30.00 fee will be assessed for any returned checks, nonsufficient funds or disputed payments.

Late Fees

- A $1.00 per minute will be charged for every minute that a child remains in the program, after the day has ended. ********Chronic late pick-up may be grounds for dismissal from the program*********
- If monthly fees have not been paid by the 7th, a $10 late fee will be added to your balance.
- If weekly fees have not been paid by Friday at 6:00 PM, a $10 late fee will be added to your balance.
- If payment has not been made by the start of the ELD Program on the following Monday, or seven days after payment was due, **the child will not be allowed to attend the program**. The child cannot be re-enrolled in any ELD program until full payment of the balance due has been made, including the $25 registration re-enrollment fee.

Expectations of Parents/Guardians

It is important to remember that without the active involvement of parents/guardians, our ELD participants will not be successful in our program. It is an expectation that parents/guardians will:

1. Always use timely communication concerning information that could affect your child's behavior in the ELD program, including changes at home, school, diet or medical limitations.
2. Give input and feedback regarding your child's experience through consistent dialogue with staff.
3. Provide an extra set of clothes and appropriate undergarments (to remain consistently stocked). Parents/guardians are expected to replenish all clothes within 24 hours.
4. Read and respond (as necessary) to weekly emails sent by ELD teachers and AC staff.
5. Provide snacks if a child has dietary restrictions, allergies or has limited tastes
6. Adhere to all policies and procedures including, but not limited to, the drop-off and pick up policy, payments and fees, health and safety guidelines, medication administration policy and behavior management guidelines.

2018-2019

Important Dates

Extended Learning and Development

First Day of School	August 27, 2018
Holiday – NO ELD	**September 3, 2018**
Early Release Day	September 12, 2018
Teacher Work Day – Optional ELD	September 19, 2018
Teacher Work Day – Optional ELD	October 31, 2018
Holiday – NO ELD	**November 12, 2018**
Holiday – NO ELD	**November 19-23, 2018**
Early Release Day	December 5, 2018
Holiday – NO ELD	**Dec. 17, 2018–Jan. 4, 2019**
Early Release Day	January 9, 2019
Holiday – NO ELD	**January 21, 2019**
Teacher Work Day – Optional ELD	January 22, 2019
Teacher Work Day – Optional ELD	February 18, 2019
Early Release Day	March 13, 2019
Teacher Work Day – Optional ELD	March 29, 2019
Holiday – NO ELD	**April 15-19, 2019**
Holiday – NO ELD	**May 27, 2019**
Last Day of School	June 7, 2019

Please note – In order to participate in the fee-based optional teacher work days, registration (sent by ELD Supervisor) MUST be completed and returned accompanied by the additional Teacher Work Day fee, a minimum of ***2 weeks prior*** to the date of service.

Revised 8.1.2018

Autism Charlotte's Inclusion Afterschool Enrichment Program

2018-2019 School Calendar

August 2018

Su	M	Tu	W	Th	F	Sa
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

September 2018

Su	M	Tu	W	Th	F	Sa
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30						

October 2018

Su	M	Tu	W	Th	F	Sa
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

November 2018

Su	M	Tu	W	Th	F	Sa
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	

December 2018

Su	M	Tu	W	Th	F	Sa
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

January 2019

Su	M	Tu	W	Th	F	Sa
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

February 2019

Su	M	Tu	W	Th	F	Sa
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28		

March 2019

Su	M	Tu	W	Th	F	Sa
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

April 2019

Su	M	Tu	W	Th	F	Sa
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30				

May 2019

Su	M	Tu	W	Th	F	Sa
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

June 2019

Su	M	Tu	W	Th	F	Sa
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30						

July 2019

Su	M	Tu	W	Th	F	Sa
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

Holiday - No ELD
Teacher Workday - full day option at all sites (fee-based service)
Early Release Day -- extended hours

Operating Hours:
All CMS Sites are open from dismissal to 6pm
All YMCA Sites are open from 2:30-6:30pm

Aug 27	First Day of School
Sep 3	Labor Day - No Afterschool
Sep 12	Early Release Day
Sep 19	*Teacher Work Day*
Oct 31	*Teacher Work Day*
Nov 12	Veteran's Day - No Afterschool
Nov 19-23	Thanksgiving Break - No Afterschool
Dec 5	Early Release Day
Dec 17-21	Holiday Break - No Afterschool
Dec 24-28 & 31	Holiday Break - No Afterschool

Jan 1-6	Holiday Break - No Afterschool
Jan 9	Early Release Day
Jan 21	Martin Luther King Jr. Day - No Afterschool
Jan 22	*Teacher Work Day*
Feb 18	*Teacher Work Day*
Mar 13	Early Release Day
Mar 29	*Teacher Work Day*
Apr 15-19	Spring Break - No Afterschool
May 27	Memorial Day - No Afterschool
June 7	Last Day of School

Attachment

A 1. Acknowledgement of Handbook

I understand and acknowledge the policies and procedures for the Extended Learning & Development Program. I further understand it is my responsibility to fulfill my parent/guardian responsibilities to the best of my ability. If, for any reason, I find I am unable to fulfill my responsibilities, I will notify the Program Director immediately.

I have read, and I understand, the procedures, transportation, program operation, expectations, health and safety, and all policies. In addition, I understand that I and my child(ren) are entering into a relationship with AC and that relationship can dissolve if policies and procedures are not adhered to.

_____

Child's Name (Printed)

_____

Parent/Guardian Name (Printed)

_____

Parent/Guardian Signature

_____

Date

Two copies of this acknowledgment will be signed by a parent/guardian. One copy is for the parent/guardian and the other will be kept in his/her child's Extended Learning & Development Program file.

Attachment

A 2. Acknowledgement for the Two-Way Release of Information

Please read the following statement, sign below, and return to the ELD Supervisor

Autism Charlotte upholds our student's and family's information with the highest confidentiality. In preparation for any health and safety emergencies, Autism Charlotte will disclose personal identifiable information to appropriate site executives (i.e. Principals, Directors) and emergency service personnel and officials. The information disclosed may include but is not limited to: name, gender, age, ethnicity, and communication ability.

I,_____(PRINTED PARENT NAME), herby acknowledge that the Extended Learning and Development Program and Autism Charlotte's Supervisors and Executives, may release personal identifiable information regarding myself or my child for the purposes of health and safety. I understand that any information released will be held in strictest confidence.

If I refuse to sign or cancel this release, my child may not be eligible to participate in the ELD Program. I may cancel this consent with written notice at any time, but that this written notice will not affect information the agency has already requested or released. I further release and hold harmless Autism Charlotte, its CEO, Directors, Supervisors, Coordinators, and staff from any and all liability that may potentially result from the release and/or use of the information.

This consent ends one year from the date I sign it, unless cancelled prior to.

_____ _____

Signature of individual authorizing the release Relationship to the child

_____

Date

_____

Child's Name (Printed)

Attachment

A 3. Authorization for Release of Information for the Purpose of Education

Please read the following statements, sign below, and return to the ELD Supervisor

I,_____(please print name), hereby authorize Autism Charlotte volunteers and interns who are assigned to the ELD site where my child is placed, to release information about their volunteer or internship experience with my child, including a general description of my child; with the exclusion of names and contact information, to relevant professors/teachers, internship supervisors, and classmates. I further release and hold harmless Autism Charlotte, its CEO, Directors, Coordinators, and staff from any and all liability that may potentially result from the release and/or use of the information. I understand that any information released will be held in the strictest confidence, that it will be viewed by only those within in the course for which the volunteer/internship experience was required and that those not so involved will not have the right to see the information.

_____
Child's Name (Printed)

_____
Parent/Guardian Signature

_____
Date

Attachment

A 4. Photo/Video Release Form

Please read the following statements, choose one option, sign below, and return to the ELD Supervisor

Please check one of the following:

_____ I hereby give permission for images of me/my child, captured through video, photo and digital camera, to be used for the purposes of Autism Charlotte promotional material, publications, and fundraising activities, and waive any rights of compensation or ownership thereto.

_____I do NOT give permission for images of me/my child, captured through video, photo and digital camera, to be used for the purposes of Autism Charlotte promotional material, publications, and fundraising activities.

Individual's Name:

_____
(please print):

Name of Parent/Guardian if individual is under the age of 16:

_____
(please print)

Individual's Signature or Signature of Parent/Guardian if individual is under age of 16:

_____

Date: _____

Attachment

A 5. Sunscreen Permission Form

Please read the following statement, sign below, and return to the ELD Supervisor

(Name of Child)_____

As the parent or guardian of the above child, I may apply sunscreen on my child before they come to camp, and will inform the teacher(s) if this is the case. The teachers of AUTISM CHARLOTTE have my permission to reapply sunscreen as needed throughout the day when he or she will be outside, especially between the times of 10 a.m. and 4 p.m. I understand that sunscreen may be applied to exposed skin, including but not limited to the face, tops of the ears, nose and bare shoulders, arms, and legs. I understand that I will need to provide sunscreen with my child's name clearly printed on the bottle (SPF 15 or higher).

_____Please allow my child to apply his/her own sunscreen, as needed.

_____Please apply sunscreen on my child as needed.

I have checked all applicable information regarding the use of sunscreen for my child:

- ❑ I do not know of any allergies my child has to sunscreen.
- ❑ I have provided the following brand/type of sunscreen for use on my child:

_____

- ❑ For medical or other reasons, please do not apply sunscreen to the following areas of my child's body:

_____

Parent/Guardian name (print): _____

Parent/Guardian signature:_____

Date: _____

Attachment

A 6. Waiver and Authorization for Treatment

Please read the following statements, sign below, and return to the ELD Supervisor

The health history is complete and accurate, and participant has permission to engage in all activities unless otherwise specified in writing. I understand that Autism Charlotte assumes no responsibility for injuries or illness which my child may sustain as a result of his/her participation in ELD Day Camp, athletics, sports programs, the use of any equipment, exercise or other activities. I expressly acknowledge that my child has been medically cleared to participate in vigorous physical activities. I also understand that there is a risk of injury while participating in physical activities. I agree to hold harmless Autism Charlotte, its staff and volunteers for accidents of injuries arising out of my child's participation in activity.

While Autism Charlotte will make every effort to provide reasonable accommodation for mentally and physically challenged children, ELD will not accept children who are (1) of danger to themselves, (2) of danger to others, (3) a disruption to the normal activities making it unreasonably difficult for other children to enjoy the Out of School Time programs. Any of the above reasons will be grounds for dismissal from ELD. A parent/guardian must discuss special conditions or circumstances involving their child with the director. This must be completed prior to registration so that the administration may make a determination if reasonable accommodations may be made for your child.

I agree to have my child examined medically within a reasonable time period by the family physician stating he/she is free from communicable disease and has not been expose to such. I hereby give my permission to the medical personnel selected by Autism Charlotte to order X-rays, routine tests, treatment, to release any records necessary for insurance purposes, and to provide or give permission to the physician selected by Autism Charlotte to secure and administer treatment including hospitalization for my child. I understand that no accident or medical insurance is provided with this activity. I give permission to Autism Charlotte, without limitation or obligation to use photographs, film footage, tape recordings which may include my child's image and/or voice for purposes of promoting or interpreting Autism Charlotte programs and release Autism Charlotte from any claim of liability to that use. I give my consent for my child to leave the Autism Charlotte site, participate in authorized Autism Charlotte activities/trips and to ride in authorized vehicles for the purpose of transportation in connection with the YMCA program.

Parent/Guardian name (print): _____

Parent/Guardian signature:_____

Date: _____

Attachment

A 7. Responsible Party Agreement

Please read the following statements, sign below, and return to the ELD Supervisor

I understand that whoever completes the registration form for this child will be held responsible for all payments to be made regarding Autism Charlotte's ELD Programs. Moreover, no party, other than those listed as the "Parent/Guardian" will be permitted to alter any information in this registration packet including, among other things, the authorization of any party signing this child out of the program. Any changes that need to be made will be in writing and submitted directly to the ELD Coordinator.

Parent/Guardian name (print): _____

Parent/Guardian signature:_____

Date: _____

Attachment

A8. Drop-Off, Pick-Up, and Release Agreement

Please read the following statements, sign below, and return to the ELD Supervisor

Autism Charlotte and staff want to ensure your child's safety while participating in our program. An authorized adult (18 years of age or older) must sign the child in and out each day. It is required by state law to sign your child(ren) out when you pick him/her up. Moreover, a late pick up will result in a charge of $1.00/minute after designated pick up times.

Parent/Guardian name (print): _____

Parent/Guardian signature:_____

Date: _____

Attachment

A9. Play Outside Fenced Area

Please read the following statements, sign below, and return to the ELD Supervisor

In addition, if the facility has planned activities outside the fenced area of the facility, I will allow my child to play outside the fenced area of the facility. (This statement is required by law)

Parent/Guardian name (print): _____

Parent/Guardian signature:_____

Date: _____