PARENT STATEMENT OF UNDERSTANDING

Policies Regarding, But Not Limited to: Tuition & Fees, Drop Off/Pick Up, Child Participation, Behavior & Special Needs, and agreement to read and follow all other Policies and Procedures stated within the Ventures Parent Handbook.

- I understand that my tuition is due by the 5th of the month for that month. If received after the 5th a late fee of $15.00 will apply and be applied monthly thereafter until account is paid to date.
- Failure to pay tuition by the 5th may result in interruption of attendance until a payment plan is set.
- I will give a two week notice if my child is being withdrawn from the Ventures Program. I am financially responsible during that two weeks’ time. If I do not give notice, I will continue to be billed for up to two weeks.
- I understand that my child must be picked up by 5:00 PM or set closing time. I will be charged $1 per minute past closing time.
- I understand that Ventures does not pro-rate for absences due to illness or personal leave. Tuition will be prorated only for calendar announced closures and forced closures (ex: weather, Covid).
- I understand that I am not to leave my child at the Ventures Program site unless a staff member is there to receive and supervise my child. If Ventures children are on the playground or on a field trip, this will require the adult to drop off at that location.
- I understand that it is my responsibility to Sign my child In upon arrival and Out at Pick-Up. There must be an exchange of responsibility from one adult to another, not from a child to staff, except for written permission for age-appropriate circumstances.
- I understand that my child will not be allowed to leave the program with an unauthorized person.
- I understand by state law that the Ventures staff are mandated to report any suspected cases of child abuse or neglect to the appropriate authorities for investigation.
- I understand that my child is NOT permitted to use personal cell phones or electronic devices while at Ventures, unless authorized by staff and parents are made aware of “screen time”.
- I understand that my child needs to leave personal items and/or toys at home unless told otherwise as they might become lost, damaged, or stolen.
- I understand that if my child has special needs that I will need to complete a PLAN OF CARE with the Ventures’ staff, along with completing the School District’s Release of Information form so we may share information and support plans within District staff, prior to starting attendance.
- I am an adult over 18 years and wish to have my child participate in the Ventures School-Age Program. I understand that even when every reasonable precaution is taken, accidents can sometimes happen. Therefore, in exchange for allowing my child to participate in the Ventures Program, I understand and expressly acknowledge that, for myself and for anyone entities to act on my behalf, waive and release the Ventures Program and staff from all claims or liabilities of any kind arising out of my participation in activities at or sponsored by the Ventures Program. I further agree to indemnify and save harmless the Ventures Program from any claims or demands arising out of any such injuries or losses. I understand that this release includes any claims based on negligence, action or inaction of the Ventures Program, its staff, directors, members, and guest.
I have read, understand, and am voluntarily signing this authorization and release.

I have read and understand the statements above regarding the Ventures School-Age Program policies and procedures.

Signature: __________________________________________ Date: ____________________________
VENTURES BEHAVIOR RULES AND POLICIES

Ventures strives to create the optimum conditions for students, offering an engaging, developmentally appropriate experience by providing supports such as adequate structure, clear expectations, and positive reinforcement.

In a group program such as Ventures, it is essential that all children are considerately following, with developmental appropriateness, the behavior rules and policies.

Program Disruption can occur for all children if an enrolled child:

1. Child refuses to follow the behavior guidelines and program rules,
2. Child leaves the group without permission, or
3. Child is disruptive to the overall program environment, which interferes with the beneficial use and enjoyment by students and staff.

Suspension and Dismissal

If such disruption to the overall safety and structure of the Ventures program is compromised by a child’s behavior and/or actions, Ventures has the right to suspend attendance until a Parent/Teacher meeting can be held; expelling this child may occur if Parent/guardians are unwilling to meet or if a behavior plan cannot be agreed upon or followed through with. It is Venture’s goal that all behavior issues be addressed cooperatively with the Ventures Staff and Parent/Guardians with the goal of creating an appropriate plan specific to that child that would allow them to continue safe involvement and participation at Ventures. Without cooperation this goal may not be adequately achieved. Outside assistance may be requested or required by Ventures Director in order for child to continue enrollment.

A student may be permanently dismissed from the Ventures Program if his/her actions have demonstrated a continued inability to follow the rules, respect for others, and/or have created a risk of injury to him/herself, or to others.

The Ventures Director reserves the absolute right to dismiss a student without refund for any behavior where:

1. the child threatens or endangers the welfare and/or safety of any student, staff, instructor, or any person involved with the program.
2. the child steals or damages Sitka Schools’ property, Ventures’ property, and/or the property of others.
3. Unruly behavior by parent/guardian.

*I have reviewed this behavior policy with my child. We agree to the following:

As the parent/guardian(s) of _______________________________, I acknowledge that I have read the behavior policy of the parent handbook. I understand that the team (parents and Ventures staff) will do everything possible to find strategies to help my child(ren) if behavior becomes an issue at Ventures. I agree to work with the Ventures staff to set up and implement a behavior plan for my child(ren) if needed. I understand that the Ventures staff is not staffed to handle students who have continuous issues that do not respond to interventions and that I may need to pick up my child from Ventures if his or her behavior requires a parent pick up per the behavior policy established at Ventures.

I understand and agree to the behavior policy at Ventures.

____________________________________  ___________  ___________
Parent/Guardian  Date  Parent/Guardian  Date

____________________________________  _________  ______________________
Child Signs  Date