



City of Largo Highland and Southwest Before and After School Programs

Southwest serves:

Anona Elementary
Madeira Beach
Mildred Helms Elementary
Oakhurst Elementary
Ridgecrest Elementary

Highland serves:

Belcher Elementary
Fuguitt Elementary
Pinellas Preparatory Academy
Pinellas Academy of Math and Science
Ponce DeLeon Elementary
Plato Largo

Enrollment Packet 2019-2020



The City of Largo Before and After School Program

This program offers children a safe, fun and healthy opportunity after school. Children in the program will have the opportunity to be involved in sports, games, arts and crafts, homework time, reading, and much more. The City of Largo looks forward to serving you and your family.

Southwest Recreation Childcare License Number: C094372

Highland Recreation Complex License Number: 52511536737

Dates: August 14th 2019 to May 29th 2020

Ages: Kindergarten through fifth grade

Time: Children will be dropped off and picked up from their school at dismissal. All parents must pick up their children from the Recreation Center by 6pm.

Schools Out Days: Special camp programs will be offered on the following schools out days:

Oct 14, 2019	Nov 25-27, 2019	Dec 23, 26-27, 2019	Dec 30-31, 2019
Jan 2-3, 2020	Jan 6, 2020	Mar 16-20, 2020	March 23, 2020
April 10, 2020			

These camp days will be held at the Recreation Complex. Parents are required to drop their children off and pick them up from the facility using the assigned entrance. Please see your site director for more details. Hours of operation during school's out days is 7 am – 6 pm.

City Holidays: The Recreation Complexes will be closed on the following city holidays:

Sept 2, 2019	Nov 28-29, 2019	Dec 24-25, 2019	Jan 1, 2020
Jan 20, 2020	Feb 17, 2020	May 25, 2020	

Days: Monday – Friday **Ratio:** 1 to 25 (School Age)

Staff: Our after school program is licensed through the Pinellas County Licensing Board. Our staff is certified by taking 40 hours of childcare training offered by the PCLB. All staff hired by the City of Largo have completed a Level 2 Background Screening, This includes local, state, and federal background checks. All staff working within our program are at least 18 years old.

Snacks: Children are asked to bring a snack and water bottle with them to the program. Snacks are not provided through the program. The parent/guardian must provide a nutritious snack. Junk food such as candy, soda and chips are not permitted. Please speak with the site director if you need healthy food choice suggestions.

Vacation Policy: The City of Largo allows for one vacation week per school year. You must submit your vacation request in writing two weeks in advance. Tuition on your vacation week will be waived.

DailyActivities

- **Rotations** are approximately 1 hour long. The scheduled rotations and activities will be posted weekly.
- **Extracurricular Activities:** Children will have the opportunity to choose between a select variety of extracurricular activities each day after school such as, cheerleading, tennis, sports and crafts. Children and parents will be able to choose their activities the last week of each month. They may change activities on a monthly basis. The classes being offered will change periodically. **These classes are scheduled each day, please plan accordingly and try not to pick up your child during class time.** Class sizes are limited depending on the enrichment offered.
- **Homework Time:** A homework time will be offered during the program. Children will be encouraged to complete their assigned homework during this time, but staff are not able to monitor what is completed.

Registration/Payments

Family Registration Fee of \$25 per family is due when registering your child for the program. Please note that if your child withdraws and re-registers in the program, this fee will be charged again. If you re-register within 60 days of your withdrawal date, a surcharge of \$75 will be charged.

Recreation, Parks & Arts Membership is required in order to participate in the after school program. The cost of the membership is determined based on individual residency within Pinellas County. All membership cards must be valid through the last day of the school year.

Cancellation of Service: If, for any reason, you wish to cancel your child's participation in the City of Largo's Before and After Care Program, you need to notify the program director in writing. Until that time, you are financially responsible for the service for which you registered your child. We will not accept a verbal cancellation.

Payment Schedule: All payments are due on Friday's for the upcoming week. A \$5.00 late fee will be assessed to all accounts not paid by the due date. The child will not be able to continue in the program until your account balance is up to date. If you use the auto debit system your payment will be withdrawn on Friday each week for the upcoming week. A \$5 per week discount is given for those who opt for our auto debit program. If your auto debit is declined you will no longer receive that discount. Tuition is collected one week in advance.

All Inclusive Plan	Standard Plan
\$75 per week for 42 weeks	\$85 per week for 38 weeks
Includes all school's out days and holiday camps.	Does not include any school's out days or holiday camps.

Easy Payment Methods:

1. Through auto-pay your weekly tuition will automatically be charged to your credit or debit card.
2. At Highland or Southwest Recreation Complexes using a cash, check or credit card. Both of these facilities are open 7 days a week.

Policy and Procedures

Photo Policy: Photographs taken by the Recreation, Parks and Arts Department at city programs and events are often used in presentations, display boards, flyers, website, brochures, and city publications. If you do not wish to have your child's picture taken, please let the staff know in advance.

Attendance and Participation:

Your child does not have to attend every day. Children are encouraged to participate when present, unless sick or injured, in which case, parents will be notified and the child will be sent home. It is required to call the facility to notify the program director when your child will not be in the program. This is a new licensing policy. Your cooperation is appreciated.

Southwest Recreation Complex 727-518-3125 or email swaftercare@largo.com

Highland Recreation Complex 727-518-3016 or email hcaftercare@largo.com

Immunizations:

All students registered in the City of Largo's child care program must have up to date immunization record. You must provide a copy of your child's record at registration.

Ambulance Service:

In the event of an emergency in which emergency medical staff warrants that the child be taken to the nearest hospital, transport fees will be the responsibility of the parent or legal guardian. This fee presently costs approximately \$1000.00

Sign Out Policy:

Parents must physically sign out their child/ren each evening. Each signature must be accompanied by the time at which you are signing. Each day must be documented with a **FULL SIGNATURE AND TIME**. Initials are not accepted as a full signature.

Parents must come into the facility and sign the children out at the end of each day. Identification will be checked at sign out. Only authorized persons will be allowed to pick up the child/ren. Those authorized are indicated on the child's enrollment paperwork. We will not release your child to any one not on this form.

Medications:

For safety reasons, the City of Largo has changed their medication policy. Staff will only administer emergency life saving medication (epi-pens, inhalers). All other medication given during after school hours must be administered by a parent, guardian or adult listed on the child's enrollment paperwork. If your child has a medication that must be administered immediately, prior to the arrival of emergency personnel, you must complete a medication form. Parents will be required to train staff on how to administer the medication. The medication must have your child's name on it and a photo attached. Medication must be in its original container. Please see the site director to receive a medication form.

Head Lice:

Any child that is found with head lice or nits will be sent home immediately and will not be allowed to return to the program until their head is free of lice and/or nits.

Late Pick-Up Fee Policy:

In the case that a parent or authorized person is late picking up a child, that individual will be responsible to pay the appropriate late fee. If a parent or authorized person is late more than three times the child will be suspended from the program. To avoid the late fee and possible suspension, please pick up your child by 6pm. **THE LATE FEE IS \$1.00 PER MINUTE PER CHILD!** This will be based on the clock at the sign out table.

Disciplinary Policy:

The City of Largo's Before and After School Program rules are enforced to ensure a safe, professional, and organized program. The following disciplinary procedures are put in place for the program participants. These disciplinary procedures are designed to help each participant learn and grow as a responsible person in a fair and consistent manner. Minor infractions of the Code of Conduct will have the following consequences that vary with the developmental level and ages of children in care:

First Offense: Verbal reprimand

Second Offense: Conference with Program Director

Third Offense: Individual circumstances will be considered and the appropriate consequences will occur:

1. written reprimand
2. suspension (1-5 days)
3. permanent suspension from program.

Each offense will be written on a disciplinary action form for the parents to sign and review with the Director. Such disciplinary policies shall include standards that prohibit children from being subjected to discipline which is severe, humiliating, frightening, or associated with food, rest, or toileting. Spanking or any other form of physical punishment is prohibited by all childcare personnel. In consideration of the nature of the offense, we reserve the right to implement whichever of the above steps are necessary.

QUALITY CHILD CARE

Quality child care offers health, social, and educational experiences under qualified supervision in a safe, nurturing and stimulating environment. Children in these settings participate in daily, age-appropriate activities that help develop essential skills. Build independence and instill self-respect. When evaluating the quality of a child care setting, the following indicators should be considered:

QUALITY CAREGIVERS

- ❖ Are friendly and eager to care for children.
- ❖ Accept family cultural and ethnic differences.
- ❖ Are warm, understanding, encouraging and responsive to each child's individual needs.
- ❖ Use a pleasant tone of voice and frequently hold, cuddle and talk to the children.
- ❖ Help children manage their behavior in a positive, constructive and non-threatening manner.
- ❖ Allow children to play alone or in small groups.

- ❖ Are attentive to and interact with the children.
- ❖ Provide stimulating, interesting and educational activities.
- ❖ Demonstrate knowledge of social and emotional needs and developmental tasks for all children.
- ❖ Communicate with parents.

QUALITY ENVIRONMENTS

- ❖ Are clean, safe, inviting, comfortable, child-friendly.
- ❖ Provide easy access to age-appropriate toys.
- ❖ Displays children's activities and creations.

- ❖ Provide a safe and secure environment that fosters the growing independence of all children.

QUALITY ACTIVITIES

- ❖ Are children initiated and teacher facilitated.
- ❖ Include social interchanges with all children.
- ❖ Are expressive including play, painting, drawing, storytelling, music, dancing and other varied activities.
- ❖ Include exercise and coordination development.
- ❖ Include free play and organized activities.
- ❖ Include opportunities for all children to read, explore, and problem-solve.

PARENT'S ROLE

- ❖ A parent's role in quality child care is vital:
 - ❖ Inquire about the qualifications and experience of child care staff, as well as staff turnover.
 - ❖ Know the children's center policies and procedures.
 - ❖ Communicate directly with caregivers.
 - ❖ Visit and observe the children's center.
 - ❖ Participate in special activities, meetings, and conferences.
 - ❖ Talk to your child about their daily experiences in the children's center.
 - ❖ Arrange alternate care for a sick child.
 - ❖ Familiarize yourself with the child care standards used to license the children's center.

PINELLAS COUNTY CHILDREN'S CENTERS GENERAL INFORMATION

For a listing of children's centers, contact 211 Tampa Bay Cares at 2-1-1.

For an appointment to review a children's center file or to file a complaint contact the Child Care Licensing Program at (727) 507-4857.

For further information about child care in Florida or to view children's center inspection reports, visit the website:

MYFLFamilies.com/ChildCare

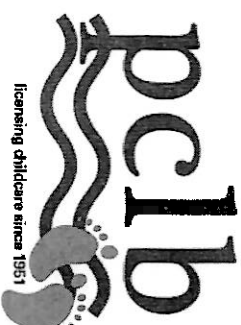


Our mission is to protect, promote & improve the health of all people in Florida through integrated state, county and community efforts.

The statewide toll-free telephone number for reporting child abuse is 1-800-96 ABUSE (1-800-962-2873). Reports of suspected and actual cases of child physical abuse, sexual abuse, and neglect received through the Abuse Registry number are referred to the Pinellas County Sheriff's Department for investigation.

KNOW YOUR CHILD'S CHILDREN'S CENTER

Nursery School * Kindergarten
Day Nursery * School Age Center



PINELLAS COUNTY LICENSE BOARD
for Children's Centers and
Family Child Care Homes
8751 Umerton Road, Suite 2000
Largo, FL 33771
Telephone 727-507-4857
www.pcclb.org

The Child Care Licensing Program and its services are funded by the Juvenile Welfare Board, the Florida Department of Children and Family Services and the Florida Department of Health, Pinellas County.

PINELLAS COUNTY CHILDREN'S CENTERS LICENSING STANDARDS

This children's center has met regulations found in Licensing Regulations Governing Pinellas County Children's Centers.

A valid temporary permit or license, which bears the distinctive seals of Pinellas County and the Florida Department of Children and Family Services, is posted in a conspicuous place within the center. A valid temporary permit or license will also include: effective and expiration dates, a license number, capacity and ages of children in care.

A LICENSED CHILDREN'S CENTER MUST:

- ❖ Adhere to its licensed capacity at all times.
- ❖ Post a schedule of daily activities.
- ❖ Have first aid and emergency procedures, and post evacuation diagrams in each room.
- ❖ Keep accurate, current daily attendance records and document a visual sweep of the entire premises at the end of each day.
- ❖ Provide parent(s) or legal guardian(s) access to the children's center during normal hours of operation.
- ❖ Report suspected child abuse to the statewide toll-free telephone number.
- ❖ Provide a permission form for parent(s) or legal guardian(s) to allow the center to administer medication as necessary.
- ❖ Document required information when administering medication.
- ❖ Document accidents and incidents and obtain parent's, legal guardian's or authorized pick-up person's signature(s).
- ❖ Maintain vehicles in safe condition if transportation is provided.
- ❖ Obtain parent's or legal guardian's permission before transporting children.
- ❖ Maintain contact information for children in vehicles being used for transport and emergency care plans for children with chronic medical conditions.

CHILDREN'S RECORDS REQUIREMENTS

The following documentation is required to be maintained in the children's center for each child in care:

- ❖ A signed statement that parent or legal guardian received a copy of this brochure.
- ❖ A statement signed by parent or legal guardian that enrollment information is complete and accurate.
- ❖ A signed statement that the children's center has provided parent(s) or legal guardian(s) a copy of the written disciplinary practices.
- ❖ A current health examination record (not required for school age children).
- ❖ A current Florida Certificate of Immunization (not required for school age children).
- ❖ A notarized Emergency Medical Release.
- ❖ Medical records that include special medical or dietary needs and a list of allergies, if applicable.
- ❖ Primary hours of care and days of week in care.
- ❖ Telephone numbers or instructions as to how to reach parent(s) or legal guardian(s) when children are in care.
- ❖ Hospital preference.
- ❖ Child's full, legal name, birth date, date of enrollment, current address and preferred name/nick name.
- ❖ Name, address, and telephone number of parent or legal guardian.
- ❖ Name, address and telephone number of emergency person(s), other than parent or legal guardian.
- ❖ Name, address and telephone number of physician and dentist.
- ❖ Proof of receipt by parent(s) or legal guardian(s) every August and September of information regarding causes, symptoms, and transmission of the influenza virus.

PERSONNEL REQUIREMENTS

- ❖ Director has a Director Credential with the certificate posted.
- ❖ Documentation that staff meets the staff credentialing requirement (not required for school age centers).
- ❖ Completion of background screening.
- ❖ Completion of 40-Hour Introductory Child Care training.
- ❖ Completion of 10 hours training annually.
- ❖ Completion of early literacy training (not required for school age centers).
- ❖ Documentation of educational requirements.
- ❖ Meet minimum age requirements.
- ❖ Signed statements that employees understand the statutory requirement of reporting child abuse/neglect.
- ❖ Staff trained in first aid and CPR on the premises at all times and on field trips
- ❖ Staff maintain direct supervision including minimum adult-child ratios:

2 months-1 year	1 adult for 3 children
1 year-2 years	1 adult for 5 children
2 year olds	1 adult for 10 children
3 year olds	1 adult for 15 children
4 year olds	1 adult for 20 children
5 years and up	1 adult for 25 children

NUTRITIONAL REQUIREMENTS

- ❖ Parent(s) or legal guardian(s) notified of meals provided that are of quality and quantity to assure child's nutritional needs are met or arrangements made for parent(s) or legal guardian(s) to provide nutritional food.
 - o Posted meal and snack menus.
 - o Safe drinking water is available.

PHYSICAL ENVIRONMENT

- ❖ Has sufficient indoor space for playing and napping that is kept clean, adequately lighted, vented and in good repair.

- ❖ Has indoor and outdoor space that is clean and free of litter and other hazards.

- ❖ Has toys, equipment and furnishings that are age and developmentally appropriate, and are maintained in an operable, safe, and sanitary condition.

- ❖ Has appropriate bathroom facilities that are operable, clean and sanitized (daily).

- ❖ Has isolation area for ill children.

- ❖ Has equipment for proper sanitary hand washing, toileting, and diapering activities.

- ❖ Has at least one corded, operable telephone available to staff.

HEALTH RELATED ENVIRONMENTAL REQUIREMENTS

- ❖ Annual approved fire inspections conducted.
- ❖ Monthly checks to ensure all areas of the children's center are free from fire hazards.

- ❖ Smoking is prohibited on premises.

- ❖ Storage of toxic and hazardous materials in areas inaccessible to children.

- ❖ Fire and emergency drills conducted as required.

- ❖ A labeled, fully stocked first aid kit.

- ❖ Parent(s) or legal guardian(s) notified of all animals on site.

- ❖ Records of immunizations for animals/fowl.

- ❖ Prohibit fire arms or weapons on premises (excluding federal, state and local law enforcement officers).

- ❖ Prohibit narcotics, alcohol or other impairing drugs on the premises.

- ❖ Bimonthly outdoor equipment maintenance checks.

This is a form for staff to fill out upon registering for the aftercare program, please bring with you when registering.

Registration Checklist:

In order for your registration to be complete you must complete and turn in the following:

- ___ The child's rec card must be good until May 29th, 2020.

- ___ Child's Identification Record Form complete with
 - * child's full name
 - * date enrolled
 - * full addresses used and **MUST** include city and zipcode
 - * phone numbers complete with area codes
 - * dentist and doctors complete address and phone number
 - * authorized pick up with full address and phone #
 - * child's date of birth
 - * work and emergency phone numbers
 - * parent signature

- ___ Release for Emergency Care Form

- ___ Authorized Pick Up List

- ___ Food Permission Form

- ___ Parent Acknowledgement Form

- ___ Photo/Video Release Form

- ___ Auto Debit Registration Form

- ___ A current Immunization Record

NO BLANK LINES OR WHITE OUT PERMITTED

****Staff please be sure that you are checking off all of the REQUIRED paperwork. Your signature below verifies that you have personally checked all paperwork and are ONLY accepting those that are FULLY completed. This is very important for the license board so please adhere to all needed above.**

Staff Signature: _____ Date: _____

Start Date of Child: _____ Grade: _____

Name of School Child Attends: _____

Please circle days child is attending:

Monday Tuesday Wednesday Thursday Friday

Please circle the parent/guardians pricing package choice:

All Inclusive Plan	Standard Plan
\$75 per week for 42 weeks	\$85 per week for 38 weeks
Includes all school's out days and holiday camps.	<u>Does not</u> include any school's out days or holiday camps.



CHILD'S ENROLLMENT RECORD

DIRECTOR'S USE ONLY Date enrolled _____

Child's full legal name _____
First Middle Last Nickname

Date of Birth _____ Sex _____

Primary Hours of Care From _____ To _____ Days of Week in Care _____

Child's Physical Address _____
Street Address (number, apartment #, street) City State Zip Code

Family Information:

Child Lives with _____

Parent's Name _____ Parent's Name _____

Address: _____ Address _____

Home Phone: _____ Home Phone: _____

Employer: _____ Employer: _____

Address: _____ Address: _____

Work Phone _____ Cell _____ Work Phone _____ Cell _____

Custody: Mother _____ Father _____ Both _____ Other _____ Name _____

Emergency Contacts:

Child will be released only to the custodial parent or legal guardian and the persons listed below. The following people will also be contacted and are authorized to remove the child from the children's center in case of illness, accident or emergency, **if for some reason the custodial parent(s) or legal guardian(s) cannot be reached:**

Name _____

Home Phone _____ Cell Phone _____

Address _____
Street Address (number, apartment #, street) City State Zip Code

Name _____

Home Phone _____ Cell Phone _____

Address _____
Street Address (number, apartment #, street) City State Zip Code

Please use additional sheet of paper to list name, address and phone number of any other people authorized to pick the child up.

CONTINUED ON BACK



EMERGENCY MEDICAL RELEASE

This form must contain only one child's name, and be the original notarized form.

A new notarized form is required when there is a change in legal guardianship.

Please Print Information

Child's Full Name: _____ Birthdate: _____

Allergies: _____

Medicines Routinely Taken: _____

Name of Custodial Parent(s)/Legal Guardian(s): _____

Address: _____
Street Address (number, apartment #, street) City State Zip Code

Home Telephone _____ Cell Telephone _____ Work Telephone _____

Family Physician's Name/Health Care Resource: _____

Address: _____
Street Address (number, apartment #, street) City State Zip Code

Telephone () _____

Hospital Preference: _____
Name City

Medical Insurance Company: _____

Policy #: _____ Expiration Date: _____

Emergency Contact (if custodial parent/guardian cannot be reached): _____

Address: _____
Street Address (number, apartment #, street) City, State, Zip Code

Home Telephone _____ Cell Telephone _____ Work Telephone _____

Sign in the presence of the Notary.

I hereby give my consent to any emergency facility and physician to administer necessary treatment to my child _____, in the event of an emergency at which time I cannot be reached. I give consent to transport by ambulance if situation warrants it.

(Child's Full Name)

Signature of Custodial Parent/Legal Guardian (Affiant)

STATE OF FLORIDA COUNTY OF _____

The foregoing instrument was acknowledged before me on _____ 20_____
(Month) (Day) (Year)

by _____, who is personally known to me or who has
(Name of Affiant)

produced _____ as identification.
(Type of Identification)

SEAL OF NOTARY

Signed: _____ (Signature of Notary)



Food Experience Permission Form

I give permission for my child _____ to participate in food related activities.

Please check one of the following:

_____ My child DOES NOT have a food allergy or dietary restriction.

_____ My child DOES have a food allergy or dietary restriction. He or she may participate, but may not eat or handle the following items (please list below)

_____ My child DOES have a food allergy or dietary restriction. He or she may not participate in activities.

Parent Signature

Date

PARENT ACKNOWLEDGEMENT FORM

PLEASE INITIAL AFTER READING AND UNDERSTANDING EACH POLICY AND PROCEDURE REVIEWED IN THE PARENT PACKET:

_____ I acknowledge that picking my child/ren up after 6pm will result in a late fee of \$1/ per minute and that more than 3 occurrences is grounds for suspension from the program.

_____ I understand that I must notify aftercare staff if my child/ren will not be in the aftercare program for the day. This is a new licensing policy and all families must comply.

Southwest Recreation 727 518-3125

Highland Recreation 727 518-3016

_____ I understand that all payments are due on Friday's for the upcoming week. A \$5.00 late fee will be assessed to all accounts not paid by the due date. My child will be suspended from the program until tuition fees are up to date.

_____ I understand that if I choose to withdrawal my child/ren, I must notify the director in writing. A \$75 re-enrollment fee will be assessed if I register again within 60 days.

_____ I understand staff will ask for identification from individuals picking up my child/ren.

_____ I understand that my child may not bring toys, games, or electronics to the program.

_____ I give permission for my child to be transported to/from school by the City of Largo Staff. I also give permission for my child to attend field trips that are announced in advance.

_____ I give permission for my child to attend walking field trips to the playground on the recreation center property.

_____ I have read and understood the discipline policy.

_____ I have read and understood the homework policy.

_____ I give permission for the City of Largo to transport my child to safety in case of an emergency such as: hurricane, tornado, flood, toxic spill, etc.

I HAVE READ AND UNDERSTAND THE CONTENTS PROVIDED IN THE PARENT PACKET FOR THE CITY OF LARGO'S BEFORE AND AFTER CARE PROGRAM.

NOTICE TO PARTICIPANTS/PARENTS/GUARDIANS:

I/We the participant or parents/legal guardians of the named children, hereby give my approval to my/his/her participation in programs and activities of the City of Largo Recreation and Parks Department. I/We do assume all risks or hazards incidental to such participation and use of equipment and facilities by myself or my minor dependents and do hereby agree to waive, release, absolve, and hold harmless the City of Largo, its employees, agents, and elected officials from any claim, loss, or injury of any kind, including losses or injury arising from the negligence of the City of Largo, its employees, agents, and elected officials.

X

Signature of Parent or Legal Guardian

Date

We use a text alert system for program updates, reminders and emergencies. The fastest way to alert our families in the event of an emergency is through text alerts. Please list the cell phone number you wish to use for such alerts:

Parent / Guardian Cell: _____

GENERAL NAME AND LIKENESS RELEASE

For good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, I hereby give the City of Largo, a municipality of the state of Florida, and its licensees, designees and assignees (collectively the "City"), the absolute and irrevocable right and permission to photograph, film, audio/videotape, and draw the undersigned in all forms of media including digital, electronic, print, television, film, radio and other media now known or to be invented and to record the results and collect all proceeds thereof (collectively the "Material") as stated below. I acknowledge that I have posed for and/or permitted the City to take my photograph, video, film, etc. or to otherwise record and/or memorialize my image, voice, and/or likeness.

1. To register for copyright the Material in the City's own name or in any other name (the Material shall be considered a "work made for hire.") To the extent that the law deems the Material not a "work for hire," I hereby assign all right, title and interest that I may have in the Material to the City and agree to execute any further necessary documents to effect this assignment.
2. To use, incorporate, broadcast, distribute, reuse, publish, republish, display and/or edit the Material and/or my name, likeness, and/or image in whole or in part, severally or in conjunction with other material(s) (including in the main or end titles) for the purposes of advertising, promoting, marketing and packaging for the City of Largo and its various programs and publications. The City has no obligation to use the Material, my name, voice or likeness.
3. To use, publish and display or permit the use, publication and/or display of the Material, including in the form of negatives, slides, prints, photographs, videos, posters, stories, and other depictions of me throughout the world, in any medium whatsoever in which the Material may appear.
4. To use the Material in any manner, format and/or medium and to alter the Material without my consent. I understand I shall not have any right to approve or disapprove any use or modification of the Material by the City.

I understand that all rights in and to the Material and any derivative works created therefrom, including but not limited to, negatives, outtakes, sounds and the images contained therein, shall be the City's sole and absolute property. I agree that the City may use my name, likeness or biological information that I have provided for any purpose associated with the Material. I assign the City all of my right, title and interest in and to the Material throughout the universe, including, without limitation, all trademarks, personality rights, publicity rights and any other intellectual property rights. I also waive any and all privacy rights, moral rights and any other rights I may have in and to the Material to the world. I understand that I do not own the copyright in the Material and I hereby waive any right to copyright that I may have in the Material.

I represent and warrant that I have the right to grant the City the abovementioned rights without obtaining the permission of, or making any payments to, any third party or entity. This authorization and release shall inure to the benefit of the legal representatives, licensees and assigns of the City. I hereby release the City from, and covenant not to sue the City for, any claim or cause of action, whether known or

unknown, for libel, slander, invasion of right of privacy, publicity or personality, or any other claim or cause of action, based upon or relating to use of the Material or the exercise of any of the rights referred to herein. I agree to indemnify and hold harmless the City and any person claiming under, by or through the City, and the elected officials, officers, attorneys, employees, and agents thereof, from and against any liabilities, losses, claims, demands, costs (including without limitation attorneys' fees) and expenses arising in connection, whether direct or indirect, with any breach or alleged breach by me of any of the above representations, warranties or agreement hereunder.

I acknowledge that, in the event of any breach by the City or any third party, the damage, if any, caused me thereby will not be irreparable or otherwise sufficient to entitle me to injunctive or other equitable relief. My rights and remedies in such event will be strictly limited to the right, if any, to recover damages in an action at law, and I will have neither the right to rescind or terminate this agreement or any of the City's rights hereunder, nor the right to enjoin the production, exhibition, or other exploitation of the Material or any subsidiary or allied rights with respect thereto. This Release constitutes our entire understanding and agreement with respect to the subject matter hereof and cannot be amended except by a written instrument signed by the parties hereto. This Release will inure to the benefit of and will be binding upon our respective affiliates, successors, licensees, assigns, heirs and representatives. This Release will be governed by the internal laws of the State of Florida, and any suit shall be brought in the Sixth Judicial Circuit Court in and for Pinellas County, Florida for state actions and in the United States District Court for the Middle District of Florida, Tampa Division for federal actions where this contract was wholly negotiated, executed and performed therein.

Signature

Date

Print Name

Date of Birth

CONSENT OF PARENT OR GUARDIAN (if under 18)

I am the father/mother/guardian of _____ (print name) and I consent to the foregoing on his/her behalf and execute this Release on his/her behalf and I will not revoke my consent.

Signature

Date

Print Name



Auto Debit Registration and Authorization Form

Program	Weekly Charge	Selected Care
Before Care	\$20.00	
After Care Inclusive	\$75.00	
After Care Only	\$85.00	
ELC Recipient		

Parent/Guardian's Name: _____

Child's Name: _____

Child's School: _____

Primary Phone Number: _____

Household Email Address: _____

Afterschool Program Location: Highland _____ Southwest _____

Auto debit will be pulled every Friday for the upcoming week. I agree for the fees for my child's childcare listed above to be paid weekly. Should any credit card (EFT) not be honored by my financial institution for any reason, I realize that I am still responsible for the total payment due. In addition, I will incur a processing fee of \$20 assessed by the City of Largo for any payments that are not able to be electronically processed. After two non-successful payment attempts, I will be withdrawn from the auto pay program. I also understand it is my responsibility to notify the City of Largo in writing should my credit card expire, my financial institution changes, or I make any changes to my account information at any time. The City of Largo requires a 10 day notice to change/cancel an EFT processing. All weekly fees are required to be paid if your child attends or not.

Initial Payment:

Membership _____ + Registration _____ + First Week of Tuition _____ = Total Due Today _____

My weekly EFT withdraw total: _____

Name as it appears on the credit/debit card: _____

Credit Card Number: _____

Expiration Date: __ __ / __ __

Parent Signature: _____ Date: _____