# Welcome to **ONWARD!**

#### Echo Valley Elementary (Washington Village Campus) Session 4: March 8, 2023 - April 21, 2023



Dear Families,

Session 4 of ONWARD will begin on March 8th, and while the groundhog may have seen his shadow, we're looking forward to some warmer weather and a whole new list of activities! Below you will find all of the information you will need to register and enroll your student(s) for Session 4 of ONWARD. Please remember that registrations need to be updated at the start of each school year (unless your child attended Summer ONWARD), and enrollment needs to be completed at the beginning of each session. Please also note, there is an additional Enrollment Form this session for students who would like to join us exclusively on Early Release days (March 22nd and April 12th) from 1pm to 3pm. The lists below should provide some guidance. Registration/enrollment forms can also be found online at: <a href="https://www.cvsu.org/domain/598">https://www.cvsu.org/domain/598</a>. All forms must be returned by Wednesday, March 8, 2023.

If this is your child(ren)'s first time attending ONWARD this year, you will need to complete the following:

- Registration Form
  - (Completed once per school year)
- Enrollment Form
  - (Completed once per session)
- Family Contribution Form
  - (Completed once per school year)
- Transportation Form (Completed once per school year)

If your student(s) registered for ONWARD Summer 2022 or Session 1, 2, or 3 of this school year, you will need to complete the following:

- Enrollment Form
  - (Completed once per session)
- ☐ Transportation Form
  - (Bus riders: The bus schedule has changed for the winter)

Thank you for being a part of the ONWARD community! If you have any questions, comments, concerns, or just want to chat about our program, please feel free to reach out to me! My inbox is always open, and I can usually be found in the ONWARD room Monday through Friday between 1pm and 5pm.

Sincerely,

Tyler K. Beede Echo Valley Elementary ONWARD Site Coordinator 802-883-2312 TBeede@cvsu.org

## **Enrollment Form**

**PLEASE NOTE:** We offer separate activities for Kindergarten/1st grade and 3rd/4th grade, and 2nd graders have their choice of either activity each day. This may change based on how many students enroll. Please be sure to circle the activity your child will be participating in, and remember to circle "Not Attending" on any day they will not be joining us. As always, let us know if you have any questions or concerns!

Student Name:
Grade:
Parent/Guardian Name:
Parent/Guardian Phone:
Parent/Guardian Email:

MARCH				
M	T W TH F			
		1	2	3
6	7	8	9	10
13	14	15	16	17
20	21	22	23	24
27	28	29	30	31

Feb. 27-Mar. 6: Winter Vacation

Apr. 12: Early Release

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Mar. 7: Town Meeting Day

Apr. 24-28: Spring Vacation

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Mar. 17: Parent Conferences

Mar 22: Early Release

= ONWARD

= School Early Release Day

#### **Activity Choices**

Please circle one for each day (circle "Not Attending" for days when your child will not join us).

For more information on activities, see the descriptions below.

	Monday	Tuesday	Wednesday	Thursday	Friday
K-2	Celebrating Past Red Clover Nominees Not Attending	It's Debatable Not Attending	Game On! Not Attending	Tumble Time  Not Attending	Finally Friday!  Not Attending
2-4	Tumble Time Not Attending	Game On! Not Attending	Recycling Machines  Not Attending	It's Debatable Not attending	Finally Friday! Not Attending

**Celebrating Past Red Clover Nominees:** Every year, the Echo Valley Elementary students read and vote on ten new picture books through the Red Clover Award program. Starting in Session 3, our K-2 students were given the opportunity to read, act out, and create art inspired by some past Red Clover nominees, and had so much fun that we have decided to bring this activity back in Session 4!

**Tumble Time:** Get your wiggles out as you cartwheel, tumble, and bounce in this gymnastics-centered activity. Each week will feature a new skill to practice, from walking on the balance beam to bouncing on trampolines and more! (Comfortable clothing, sneakers, and a water bottle are highly recommended!)

**Game On!:** Explore the art of creating and playing games. Each week will feature a new selection of games, ranging from classics like Bingo and Four-Square to all new, student-designed games!

**Recycling Machines:** Reduce, reuse, recycle, and have fun doing it! Using recycled materials and our abundant creativity, we will practice building simple machines, from pulleys and levers to whole Rube Goldberg machines, all while learning about the importance of recycling and its impact on the world around us.

It's Debatable: The art of debate may have started in Ancient Greece, but it still thrives in the halls of Echo Valley Elementary! Bring your best argument and join us as we learn about formal debating.

**Finally Friday:** Every Friday, the kids will be given the opportunity to choose their activity for the afternoon. This is a great opportunity to revisit a favorite activity from earlier in the week, or try something totally new!

# **Early Release (ONLY) Enrollment**

This year, ONWARD Afterschool is offering the opportunity for additional students to join us on Early Release days. <u>Students</u> who wish to enroll on these days will need to return this form as well as the attached Registration Information Packet.

Students who are enrolled for Wednesdays (see previous page) as regular attendees do not need to return this form in addition to their regular enrollment.

<u>Students enrolled exclusively for Early Release days will be enrolled only from 1:00pm to 3:00pm.</u> Please note that bus services will not be provided. Enrollment is on a first-come, first-served basis, and <u>all enrollment forms must be returned no later than</u> Wednesday, March 8, 2023.

To enroll your student for Early Release days from 1:00 to 3:00 ONLY, please provide the following information in addition to the attached Registration Information packet:

Student Name:	
Grade:	
Parent/Guardian Name:	
Parent/Guardian Phone:	
Parent/Guardian Email:	

Early Release Date	Activity
Wednesday, March 22, 2023	ONWARD Activities
Wednesday, April 12, 2023	No Strings Marionette Company

## **About Early Release Activities**

**ONWARD Activities:** Extra time at ONWARD means extra time for activities! We will be running our regularly-scheduled activities with some fun-filled group activities mixed in.

**No Strings Marionette Company:** Join us for an afternoon of creativity and entertainment with the No Strings Marionette Company and their collection of hand-crafterd marionettes! Students will have the opportunity to learn about these unique creations and how they are used in storytelling.



### Bridges Afterschool and ONWARD! Afterschool

Registration Form 2022-2023

Northfield Roxbury Orange Washington Williamstown

This form needs to be completed only once per year (July 1 to June 30) unless any information has changed.

1. Student Information				
Student's Name:		DOB:		
Student's Mailing Address:				
Student's School:	Gra	ade:Tea	acher:	
2. Parent Information				
Name of Parent(s)/Guardian(s): Mailing Address (if different from above): Employed at:				
Employed at: Home phone #:	_Work #:	Cell #:		
Email address:				
If student also lives with another parent o Name of Parent(s)/Guardian(s): Mailing Address: Employed at:				
Home phone #:	WOrK #:	Ceii #	:	
3. Health Information				
<ul> <li>Does your child need to take any medical</li> </ul>	ation during afterschool pro	gram time?	☐ YES	□ NO
<ul> <li>Does your child have an illness, allergy,</li> </ul>	☐ YES	□ NO		
<ul> <li>Does your child have an IEP or 504 Plan?</li> </ul>			☐ YES	□ NO
<ul> <li>Does your child wear glasses or contact</li> </ul>			☐ YES	□ NO
<ul> <li>Does your child have social, emotional,</li> </ul>			☐ YES	
If you answered yes to any of the above of how we can best support their afterschool child, we may require a doctor's note before	ol experience, please use th	ne space below		-
Do you have health insurance for your chi				
Name of child's doctor:				
Name of child's dentist:	Pho	ne #:		
4. Pick-Up Permission				
Safety is our highest priority! Other than your child? The individuals must be at least identification. Any changes to this list must	st 16 years old and must be	able to show at	least one form	
Name:	Phone #:		Relationship:	
Name:				
Name of	Db #-			

### 5. Agreement to Terms

Please initial to indicate your acceptance of accept/agree to the terms.)	f/agreement with each item below. (No	t initialing indicates that you do not			
I authorize the CVSU Afterschool Program to access my child's school file, including but not limited to health records, free and reduced lunch status, and special education accommodations.					
	nsult with my child's teachers and other sill be shared on an as-needed basis only.	chool personnel regarding my child's			
I understand that photographs or video image(s) to be used.	s may be taken for publicity purposes. I giv	e permission for my child's			
I give permission for surveys to be giver	n to my child and my family for program ne	eds.			
I give permission for my child to particip to field trips requiring transportation.	pate in offsite walking field trips. <i>Permissio</i>	n forms will be sent home prior			
I give permission for my child to particip	oate in wading activities.				
I give permission for my child to particip	pate in swimming activities.				
I allow CVSU Afterschool Program staff first-aid products to my child.	to apply sunscreen, insect repellent, antib	otic cream, and other topical			
If walking field trips are interrupted by i program site without requiring further r	nclement weather, I authorize vehicular to notification of such transportation.	ansportation for my child back to the			
I authorize the CVSU Afterschool Program to access to my child's immunization records on file with the school. I understand that, if I deny this authorization, I am required to provide immunization records directly to the CVSU Afterschool Program before my child can participate.					
I have received the CVSU Afterschool Family Guidebook; I have read, understand, and agree to the policies stipulated therein.					
6. General Release  A) I hereby give permission for my child to p incidental to such participation, including traindemnify, and agree to hold harmless the C agents, officials, employees and volunteers, out of an injury to my child. I will notify CVSC.  7. Medical Release  B) In the event that my child is injured or necontact me before administering treatment person(s) named below to be called for auth	ensportation to and from activity, and I have a like or	nereby waive, release, absolve, ont Supervisory Union, their officers, ad participants for any claim arising y child changes.  hospital personnel will attempt to eby give permission for the			
Name:	Relationship to Child:	<u></u>			
	Work:	Cell:			
Name:	Relationship to Child:				
Home:	Work:	Cell:			
<b>C)</b> I authorize <i>CVSU Afterschool Program</i> staff or physician's office at my expense. I unde					
Signature of Parent/Guardian:Printed Name of Parent/Guardian:		Date:			

### Registration of Additional Child(ren)

If you have (an)other child(ren) to enroll in the same CVSU Afterschool Program and for whom all of the information in Sections 2, 4, 5, 6, and 7 is the same, you may use this form to enroll the other child(ren). You may make copies of this form if necessary. If any information other than that in Sections 1 and 3 differs for the additional child(ren), or if additional child(ren) will attend a different CVSU Afterschool program, please complete a separate registration form for them.

1. Student Information				
Student's Name:		DOB:		
Student's Mailing Address:				
Student's School:		Grade:	_Teacher:	
3. Health Information				
• Does your child need to take any medication	during afters	chool program time?	☐ YES	□ NO
<ul> <li>Does your child have an illness, allergy, healt</li> </ul>	h problem, or	disability?	☐ YES	□ NO
<ul><li>Does your child have an IEP or 504 Plan?</li></ul>			☐ YES	□ NO
<ul> <li>Does your child wear glasses or contact lense</li> </ul>	s?		☐ YES	□ NO
• Does your child have social, emotional, or be	havioral chall	enges?	☐ YES	□ NO
David have backle in common factor (1912)	- Dyrc	Пио		
Do you have health insurance for your child?	☐ YES	□NO		
Name of child's doctor:				
Name of child's dentist:		Phone #:		
☐ I certify that the information in Sections for this child.	2, 4, 5, 6, and	d 7 of the original reg	istration form is the	e same
Parent Signature			 Date	

This form MUST be attached to the original registration form.

We depend on family contributions to continue to offer quality programs. However, all CVSU students are welcome regardless of their family's ability to pay. Please use this form to determine our suggested per-child contribution. If that amount is more than you can afford, we ask you to pay what you can. If you have any questions or concerns, please call Cara Sargent at 802-455-8712.

CVSU AFTERSCHOOL Family Contribution Form 2022-23

corresponding box.	d amount or your	ranning 3 contribution	and check the
CVSU Afterschool Program Fees	□ <b>Tier 1</b> Household income is > \$150,000	□Tier 2 Household income is < \$150,000 and students do not receive F/R lunch	□Tier 3 Students receiv F/R lunch
Daily Rate	\$10.00 per child per day	\$5.00 per child per day	\$2.00 per child per day
Please check one option below:			
$\square$ I will pay the suggested contribution.			
$\Box$ I am unable to pay the suggested contribution, by	out will contribute \$	·	
$\square$ I am unable to pay anything at this time.			
Please remember that all of our students are welcome amount of the family's contribution.	me, regardless of the	eir family's ability to pa	y or the
We accept checks and cash. Please make checks out Coordinator or mail to CVSU Afterschool, 37 Cross S directly to the Site Coordinator.	•	•	
We appreciate receiving contributions at the beginn deliver or mail a reminder to you during the session Please indicate your intention to do so with your first	. You may pay in ins	· ·	
Parent/Guardian Signature	Date		

## CVSU Afterschool Transportation Form School Year 2022-23

## **Echo Valley**

Student Name:	
Parent/Guardian Name:	
Parent/Guardian Phone Number:	
Afterschool Program Location:	
How will your child get home from the Afterschool Prog	ram? □ Walk □ Pick up □ Bus
If using the bus, please indicate your stop below.  Actual pick-up and drop-off times may vary due to travel condit the published time for actual arrival. You will be notified of any	
	p.m.
Echo Valley Elementary School	4:50
Echo Valley Middle School	5:00
Gramp's Country Store	5:20
Tucker Rd./Spencer Rd.	5:40
Morrie Rd./Woodchuck Hollow Rd.	5:50
Echo Valley Elementary School	6:00
By completing this form, I acknowledge that my child will depart f and that <b>changes to my child's transportation plan must be comr</b> that, if my child is a walker, once they have signed out for the day, <i>Program</i> is no longer responsible for their safety. If my child rides their indicated stop regardless of a parent's presence, unless they be returned to their program site, and that it is my responsibility t "pick-up," I understand that they will only be released to individ	municated in writing to the Site Coordinator. I understand the Central Vermont Supervisory Union Afterschool the late bus, I understand that my child will get off at have not yet completed 2 <sup>nd</sup> grade, in which case they will so ensure my child's safety at this time. If my child is a
Parent/Guardian Signature:	Date: