



AFTER SCHOOL RECREATION

All classes are held at school campus • No class on days of no school
Register online 9/4/19! www.crpdpd.org/reg – keyword “afterschool”

**Parks
Make
Life
Better!**SM

TUESDAYS 9/17-11/12

2:45-3:45pm
No classes 10/15

Grades 1-5

UKULELE

#7720.4191

\$75

Learn to play the Ukulele! This popular little instrument from Hawaii is easy and fun to play! Learn chords, strums, and how to sing along to your favorite songs! Ukulele available to rent; \$10 for the session.

Instructor: Tom Kuznkowsli

Grades 1-5

CReATE IT WITH CARDBOARD

#7727.4191

\$75

Lab fee \$15

Explore the endless possibilities of this eco material through weekly themed projects. Build structures, mazes, rain sticks, masks and more.

Instructor: CReATE STUDIO

Please register early to avoid disappointment!

Classes not meeting minimum enrollment may be cancelled.

Have an idea for a class or know someone who may be interested in teaching a class?

Call Thousand Oaks Center staff at 805-381-2793 or email toc@crpd.org.

First Day of Class: Children meet in the MPR immediately after school is dismissed to meet their instructors. After the first day, students meet at the assigned location.

Lab Fees: Must be paid at the time of class registration by check, cash, or credit card. Lab fee is separate from class fee.

Pick-Up: Children must be picked up immediately after class. Failure to pick up your child on time could result in dismissal from the program without a refund.

\$1 per minute late fee will be charged.

Absences: Please notify Thousand Oaks Center staff at 805-381-2793 if your child will be absent. Attendance is taken in each class and absences are verified.

Rainy Days: Rain or bad weather will not cancel programs; classes will be moved indoors.

Refunds & Cancellation by the Participant

- A full refund will be granted if we are notified 2 business days prior to class.
- Refunds or transfers will not be granted day of class or once a class has begun.
- Students may NOT “try out” a class.
- Refunds for medical reasons will be granted on a pro-rata basis; written verification by a physician is required.

Cancellations by Conejo Recreation & Park District

- A full refund will be made if a class is cancelled by the District prior to the class starting date.
- Children may be dismissed from the program without a refund due to behavior problems.

Registration for Classes & Lab Fees is now ONLINE! www.crpdpd.org/reg using keyword: afterschool (Lab fees must be paid when registering)



Conejo

Weathersfield

Recreation & Park District

AFTER SCHOOL RECREATION

*Todas las clases son en la escuela • No clases en dias de no escuela
Registracion en linea 9/4! www.crpdpd.org/reg – palabra clave
"afterschool"*

**Parks
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Martes 9/17-11/12

2:45-3:45pm

No classes 10/15

Grades 1-5

CREANDO CUPCAKES

#7720.4191

\$75

Aprende a tocar el ukelele! Esta pequeño instrumento popular de Hawai es fácil y divertido de jugar. Aprende acordes, rasgueos y cómo cantar tus canciones favoritas! Ukulele disponible para alquilar; \$10 para la sesión.

Instructor: Tom Kuznkowski

Grades 1-5

CReACIONES DE CARTON

#7727.4191

\$75

\$15 de materiales

Explora las infinitas posibilidades de este material reciclable a traves de proyectos tematicos semanales. Construye estructuras, laberintos, palos de lluvia, mascaras y mucho mas.

Instructor: CReATE STUDIO

Favor de registrarse temprano para evitar decepcion! Clases que no tengan el minimo de estudiantes seran canceladas.

Tiene una idea para una clase nueva o conoce e alguien interesado en dar clases?

llame Thousand Oaks Centro al 805-381-2793 o [emial toc@crpd.org](mailto:emialtoc@crpd.org)

PRIMER DIA DE CLASE: Los niños se reuniran con sus instructores en el MPR inmediatamente despues de la escuela. Despues del primer dia, el estudiante tiene que ir a su lugar asignado.

CUOTA DE MATERIALES: Deben ser pagada a la misma vez que se inscribe para la clase, puede pagar con cheque, efectivo o tarjeta de credito.

RECOGIENDO: Niños deben ser recogidos inmediatamente despues de la clase. Si no son recogidos a su niño(a) a tiempo puede resultar en expulsion del programa sin la devolucion de dinero. Por cada minuto que llegue tarde una multa de \$1.00 por minuto sera cobrada.

AUCENCIA: Por favor notifique a Thousand Oaks Center al (805) 381-2793 si su niño(a) estara aucente. Tomamos lista cada dia y las ausencias son verificadas.

DIAS LLUVIOSOS: Las clases no se cancelaran por lluvia o mal clima. Las clasesse moveran adentro.

Rebolsos Y Cancelaciones de Participante

- Se concedera un reembolso completo si nos notifica 2 dias de negocio antes de la primera clase.
- Los rebolsos no se concederan el dia de las clase o una vez que haya comenzado.
- Los estudiantes no pueden "probar" una clase.
- Los rebolsos por razones medicas seran concedidas con verificacion por escrito de un medico. Y sera dadas de manera prorrate.

Cancelaciones por Conejo Recreation & Park District

- Se concedera un reembolso complete si la clase es cancelada por el distrito antes del primer dia de clases.
- Los estudiante pueden ser expulsados del programa sin devolucion de dinero por problemas de comportamiento.

Registracion para clases y materiales esta disponible en linea! www.crpdpd.org/reg use la palabra clave: *afterschool* (Materiales deben ser pagados a la hora de registracion)

Weathersfield After School Recreation Registration Form

Parent Name/*Nombre del padre* _____ Email _____

Address/*Domicilio* _____ City/*Ciudad* _____ Zip/*Código Postal* _____

Day Phone/ _____ Evening Phone/ _____

Número de teléfono durante el día _____ *Número de teléfono por la noche* _____

Activity Number <i>Número de actividad</i>	Participant's Full Name <i>Nombre Completo del Participante</i>	Teacher's Name & Grade <i>Nombre del maestra/o y Grado</i>	Birthdate <i>Fecha de nacimiento</i>	Gender <i>Genero</i>	Fee <i>Precio</i>
Total →					

Special medical conditions or allergies/*Condiciones medicas especiales/Alergias* _____

Method of Payment: MasterCard Visa Visa/MC Check/Debit Card AmEx Discover Check/Money Order Cash
Forma de pago: Tarjeta de débito Cheque Efectivo

Cardholder's Name (please print) _____ Signature _____
Titular en la tarjeta (Imprima su nombre) Firma

Charge to Card # _____ Exp. Date (mm/yy) _____
Número de la tarjeta Fecha de Vencimiento

After class, my child: / *Después de clase mi hija/o:*

- Will be picked up in the room / *Sera Recogido en el salón*
- Has permission to walk to parking area / *Tiene permiso de Caminar al estacionamiento*
- Has permission to ride his/her bike / *Tiene permiso de Irse en su bicicleta*
- Has permission to walk home / *Tiene permiso de caminar a casa*
- Will be escorted by CRPD staff to onsite Child Care / *Tiene permiso de Irse a la guardería*

Online, Email, FAX or Walk-In Registration To:
Enlínea, Email, FAX ó llege a un centro para registraci3n:
Thousand Oaks Community Center
2525 N Moorpark Rd, Thousand Oaks CA 91360
Email: toc@crpd.org • FAX: (805)493-2391 • Ph: (805)381-2793
Make Checks Payable to CRPD
Haga los cheques a nombre de CRPD

AGREEMENT, WAIVER, AND RELEASE

In consideration for being permitted by the Conejo Recreation & Park District ("CRPD"), City of Thousand Oaks ("CTO"), Conejo Open Space Conservation Agency ("COSCA"), Conejo Valley Unified School District ("CVUSD"), and City of Westlake Village ("WLV") to participate in the above activities, I hereby waive, release, and discharge in advance CRPD, CTO, COSCA, CVUSD, and WLV (their officers, employees, and agents) from any and all liability arising out of or connected in any way with my participation in said activities, including the active or passive negligence of each of the named above or any other participants in the event. The parties to this AGREEMENT understand that this document is not intended to release any party from any act or omission or "gross negligence," as that term is used in applicable case law and/or statutory provision. It is understood that these activities involve an element of risk and danger of accidents and knowing those risks I hereby assume those risks. It is further agreed that this waiver, release, and assumption of risk is to be binding on my heirs and assigns. I agree to indemnify and to hold the above person or entities free and harmless from any loss, liability, damage, cost, or expense which they may incur as the result of my death or any injury or property damage that I may sustain while participating in said activities.

PARENTAL CONSENT: *(to be completed and signed by parent/guardian if applicant is under 18 years of age)* I hereby consent that those listed above participate in the above activities, and I hereby execute the above Agreement, Waiver, and Release on his/her/their behalf. I state that said minors are physically able to participate in said activities. I hereby agree to indemnify and hold the persons and entities mentioned above free and harmless from any loss, liability, damage, cost, or expense which they may incur as a result of the death or any injury or property damage that said minors may sustain while participating in said activities.

I UNDERSTAND THAT IMPORTANT INFORMATION is available regarding 1) concussions that may occur during physical activities, and 2) information regarding the use of opioids, and acknowledge receipt of the information via www.crpdp.org/concussion and www.crpdp.org/opioid.

CONSENT FOR EMERGENCY MEDICAL TREATMENT: As the participant or the parent, legal guardian, or appointed conservator of the participant of this program, I hereby give consent to the Conejo Recreation & Park District to obtain all medical or dental care for myself or my dependent as prescribed by a duly licensed medical professional. This care may be given for whatever conditions are necessary to preserve the life, limb, and well-being of myself or my dependent.

I UNDERSTAND THAT THE CONEJO RECREATION AND PARK DISTRICT HAS A CODE OF CONDUCT (www.crpdp.org/conduct) **AND AGREE TO ABIDE BY ITS POLICIES AND CONDITIONS.**

I HAVE CAREFULLY READ THIS AGREEMENT, WAIVER, AND RELEASE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND THE CONEJO RECREATION & PARK DISTRICT AND I SIGN IT OF MY FREE WILL.

Signature / *Firma* _____

Name (Printed) / *Nombre (Impreso)* _____

Date / *Fecha* _____

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