AFTER SCHOOL RECREATION

All classes are held at school campus • No class on days of no school
Register online 3/6/20! www.crpd.org/reg – keyword “afterschool”

TUESDAYS
3/31-5/5
2:45-3:45
No class 4/14

Grades 1-5

SPANISH #7720.2201
$47
Lab fee: $5
Learn to write and speak in Spanish through songs and games. Read simple stories and develop your Spanish vocabulary. Learn to put sentences together and use them in daily conversations.

Instructor: Maria Ackerman

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-rate 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.crpd.org/reg using keyword: afterschool
(Lab fees must be paid when registering)

Not affiliated with CVUSD • ConejoRPD Tax ID #95-2265201
Todas las clases son en la escuela • No clases en días de no escuela

Favor de registrarse temprano para evitar decepción! Clases que no tengan el mínimo de estudiantes serán canceladas.

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

Llame al centro de Thousand Oaks al 805-381-2793 o email toc@crpd.org

PRIMER DIA DE CLASE: Los niños se reunirán con sus instructores en el MPR inmediatamente después de la escuela. Después del primer día, el estudiante tiene que ir a su lugar asignado.

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

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

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

DIAS LLUVIOSOS: Las clases no se cancelarán por lluvia o mal clima. Las clases se moverán adentro.

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

No afiliado con CVUSD • ConejoRPD Tax ID #95-2265201

MARTES
3/31-5/5
2:45-3:45 No
Class 4/14

Grados 1-5

SPANISH $47
#7720.2201
$5 DE MATERIALES
Aprende a escribir y hablar en español a través de canciones y juegos. Lee historias simples y desarrolla tu vocabulario en español. Aprende a armar oraciones y usarlas en conversaciones diarias.

Instructor: Maria Ackerman

Reembolsos Y Cancelaciones de Participante
- Se concedera un reembolso completo si nos notifica 2 días de negocio antes de la primera clase.
- Los reembolsos no se concederan el dia de la clase o una vez que haya comenzado.
- Los estudiantes no pueden “probar” una clase.
- Los reembolsos por razones medicas seran concedidas con verificacion por escrito de un medico. Y se dará de forma prorrateada.

Cancelaciones por Conejo Recreation & Park District
- Se concedera un reembolso completo si la clase es cancelada por el distrito antes del primer dia de clases.
- Los estudiantes pueden ser expulsados del programa sin devolucion de dinero por problemas de comportamiento.
I hereby 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.

Special medical conditions or allergies:
__________________________________________________________________________

Condiciones medicas expeciales/Alergias:
__________________________________________________________________________

Method of Payment:

- [ ] MasterCard
- [ ] Visa
- [ ] Visa/MC Check/Debit Card
- [ ] AmEx
- [ ] Discover
- [ ] Check/Money Order
- [ ] Cash

Charge to Card # ____________________________________________________________________________

Exp. Date (mm/yy)________________________

Make Checks Payable to CRPD

Haga los cheques a nombre de CRPD

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.crpd.org/concussion and www.crpd.org/opoid.

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.crpd.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.