## Beekman Teen Leadership Council

Grades 9 & up

## Overnight Adventures!

# Judgement Free Group!!



## Leadership and Community Service for College Applications

Parties!!

Wednesdays 6:30-8:30 pm \*Free\*

Trips!

The Mission of the Town of Beekman, Recreation and Parks Teen Leadership Council is to provide a fun and safe environment in which all Beekman teens have the opportunity to make decisions about their own participation and programs and to encourage teens to assume responsible roles in the community.

An adult partner serves as the Teen Advisor who facilitates the group of teens as they develop projects, activities and trips that meet their interests; helps them develop related skills; and guides them in securing the resources they need to carry out their goals.

Weekly workshops are FREE: Funded by the Town of Beekman. Activities have fees.



845-227-5783 www.townofbeekman.com





### TOWN OF BEEKMAN RECREATION AND PARKS DEPARTMENT

29 Recreation Center Rd., Hopewell Junction, NY 845-227-5783 227-9685(fax)

email: recdirector@townofbeekmanny.us

School Year **2021-2022** 

#### **Youth & Teen Information**

To be completed annually for youth in K-12 prior to registering for day/evening programs

Participant Last Name			articipant First Name			Middle Initial
•			·			
Participant Street Address			Т	Гown	State	Zip
/						_
Date of Birth Age	Sex Scho	ool if currently a s	tudent			Grade
Participant Cell Phone Number	Partici	pant Cell Phone P	rovider	Participant	email	
Participant allergies & health prob	lems and concerr	าร				
Parent/Guardian #1 Last Name	Parent/Guardian	#1 First Name	Parent/Guardian #	1 date of birth	Parent/Guardian #1em	nail address
Parent/Guardian #1 Home Phone	<del></del>	Work Phone			Cell Phone	
Parent/Guardian #2 Last Name	Parent/Guardian	#2 First Name	Parent/Guardian #2	2 date of birth	Parent/Guardian #2em	nail address
Parent/Guardian #2 Home Phone	<u> </u>	Work Phone			Cell Phone	
					up your child at the	e end of
					up your child at the	e end of
Please list at least TWO oprograms or in the event #1 Last Name #1 Home Phone	of emergenci		or behavior issue	es	up your child at the	e end of
#1 Last Name	of emergenci	es, medical &	or behavior issue	es		e end of
#1 Last Name #1 Home Phone	of emergenci #1 First Name	es, medical &	Address	es Ce		e end of
#1 Last Name #1 Home Phone #2 Last Name	of emergenci #1 First Name	Work Phone	Address	es Ce	II Phone	e end of
#1 Last Name #1 Home Phone #2 Last Name #2 Home Phone	#1 First Name #2 First Name #3 First Name	Work Phone  Work Phone  Work Phone	Address  Address	Ce Ce	II Phone II Phone	

#### Beekman Recreation & Parks Teen Leadership Council



### Participant Contract

, agree to become an active participant in the
eekman Recreation & Parks Teen Leadership Council. I understand the purpose of the program is
or teens to work closely with adults and their peers on developing as a person in the following areas:
ecoming a leader, exploring career options and leading a healthy lifestyle. I understand that my
esponsibilities in the program will be to
<ul> <li>be a member of the club for at least three (3) months before engaging in external Leaders activities [new members only]</li> </ul>
<ul> <li>attend at least 75% of all scheduled meetings and activities</li> </ul>
<ul> <li>complete at least five (5) hours of service to others every 2 months *</li> </ul>
complete an introductory interview
<ul> <li>complete a short term/quarterly goal-setting sheet three times per year</li> </ul>

- complete a long term goal-setting sheet once per year
- Show respect to others by not speaking while others are and being an active listener
- Put my cell phone away at beginning of each meeting and not take it out unless directed to by Leadership Advisor
- "Be here now": I will participate in all activities and interact in a positive manner
- Display maturity; is accountable for words, actions, and behaviors
- Will check emails at least twice weekly to stay up to date with TLC activities and respond appropriately

* Continuous standard and must b Leaders activity	e achieved prior to the participation in any external
By signing this contract, I am making	a commitment to myself and the program to SUCCEED.
Signature	Date
Printed Name	Grade
Mailing Address	
Home phone	Cell phone
Email Address	

Beekman Recreation and Parks Disclaimer for:			
Release:	Registrant's First Name	Registrant's Last Name	

I understand there are risks of physical injury in participating in sports and recreational activities or programs. I give permission for the person I am registering (myself or my child/ward) to participate in programs sponsored by the Town of Beekman Department of Recreation & Parks. I release the Town of Beekman, its officers and its Directors from any liability from any injury or loss suffered during this program. I further state that said person is in good health and medical condition unless otherwise indicated. I agree that any letters, projects, photos and videos made during the program are the property of the Town of Beekman and as such can be used for display purposes and promotional materials.

I hereby consent to emergency medical procedures deemed advisable for me if I am unable to communicate, or for my child in the event I cannot be reached and my child has sustained an injury. The Town of Beekman Department of Recreation & Parks does not provide accident or hospitalization insurance for participants of its programs. All participants are advised to have adequate personal coverage. I have considered participant's own health, experience, and tolerance for risk before participating registering for this program.

I further agree to the Program Registration Policies, and if I am registering a child, I agree to the "Program Registration Policies" and the "Behavior Guidelines and Discipline Policy" as defined below:

#### **Program Registration Policies**

#### Definition of "Household" and "Family":

A household is a family with up to 2 parents and their unmarried children under 24 years of age living permanently in the residence; if there are multiple generations living at the same residence, each must set up their own account. If a Family Membership is purchased, it is for the Family as defined above and no other individuals.

#### **Annual Proof of Residency:**

To be eligible for Town of Beekman resident discounts for programs, proof of residency must be provided in the form of:

- 1. A tax or utility bill, AND
- 2. Proof of identity in the form of a Government Issued Photo ID

#### **First Come First Served Policy:**

Registration for all programs is open first to residents and employees of the Town of Beekman. After the published dates, non-residents will be allowed to register for a higher rate unless specified otherwise.

#### **Enrollment:**

For most programs to be conducted, a minimum enrollment must be reached. Please do not wait to register. Nothing cancels programs more than waiting until the last minute. Registration is done on a first come, first served basis, with residents and employees given first opportunity.

#### **Methods to Register:**

All registrations are taken at the Recreation Office in the Gatehouse in Recreation Park beginning with residents on the published dates:

- 1. In person registration is received Monday Friday from 9:30am-3:30pm
- 2. After hours completed Registration Forms printed from <a href="www.beekmanrec.com">www.beekmanrec.com</a> with a check payable to "Town of Beekman" can be left in the Mailbox at the door of the Gatehouse (29 Recreation Center Road). Registrations received in the mailbox will be confirmed by email, so please be sure to <a href="CLEARLY PRINT">CLEARLY PRINT</a> your email address.

#### **Program Transfer Fees:**

There is a \$10 fee anytime a participant changes sessions, dates or programs

#### Refunds:

- All cancellation/refund requests must be in writing
- A prorated refund minus a \$15 Cancellation fee will be applied if a replacement can be found
- A Doctor's note is required prior to the end of the program for requests related to illness or accident
- A full refund will be given for any program cancelled by the Recreation Department due to lack of enrollment.
- No refunds are made due to acts of God/weather if the Town has already incurred expenses
- No refunds are made due to dismissal from a program due to behavioral issues

#### Continued

#### **Disclaimer Continued**

#### **Facility Refunds**

No refunds will be made for cancellations 2 months or closer to the event, unless another renter is found. In that case 25% of fee will be retained for processing and the remainder returned.

All other cancellations will incur a \$15 Cancellation Fee.

#### **Weather Related Cancellations:**

All program and event cancellations are kept current on the Recreation Department website. Many of our programs follow the Arlington Central School District calendar. This includes weather related delays and cancellations.

#### **Behavior Guidelines and Discipline Policy**

#### **Beekman Rec Mission Statement**

The mission of the Town of Beekman Recreation & Parks Department is to provide recreational opportunities which will encourage a healthy and active lifestyle. We strive to promote lifelong leisure skills and to enhance the quality of life and sense of community for all residents of the Town of Beekman.

#### **Expectations of Parents**

- Child's health and emergency information will be kept up to date; the Rec Office will be informed of any changes
- Children with a fever or contagious illness must be kept home
- For programs requiring a "sign-out a parent, or designated adult as indicated on Registration Form, will come with photo ID and sign child out
- Parents will support Beekman Rec expectations of children and the discipline policy
- Parents will be available, or have an emergency contact that is available, to pick up their child immediately in the event of an injury, a health, or a discipline issue

#### **Expectations of Children**

We expect the children in our programs to be a positive part of our caring community: staff model, and children are guided, to be kind, considerate, caring and helpful

- Children will be honest
- Children are responsible for their own belongings
- Children are responsible for controlling their own behavior keeping their hands and bodies to themselves
- Children will be toilet trained unless in care giver and me programs
- Children are respectful to staff and listen to staff with a caring heart
- Children are respectful to each other conducting themselves in a courteous manner
- There will be no bullying
- Children will treat belongings, equipment and the park with care
- Children will discard their own garbage
- Children will not bring valuables or electronic equipment to the program
- Indoors, there will be no running, cart wheels, or throwing balls; but we will have time for that outside!
- Children will stay with the group

If the above rules are not followed we will adhere to the discipline policy below

#### **Discipline Policy**

The staff will create a warm and caring atmosphere with established rules to ensure the emotional and physical safety of all. There will be consistent consequences to children who have difficulty following the rules that include, verbal warning, time out, exclusion from activity, parental consultation, early pick-up by parent, suspension and/or removal from the program without refund.

- 1st Offense the child will be warned verbally by a staff member.
- 2<sup>nd</sup> Offense the child will be warned along with a 5-10 minute time out from the activity.
- 3<sup>rd</sup> Offense a parent will be called for immediate pick-up from a short term program and for a consultation in a long term program. If after the consultation there is a 4<sup>th</sup> Offense the parent will be called for immediate pick-up.

The Recreation Director reserves the right to ban any child from attending Rec programs based on repeated offenses at Rec programs.

In registering myself or my child I agree with all of the above.				
Signature	Relationship to Registr	Relationship to Registrant (Self or Parent/Guardian if Registrant is a minor)		
Printed First Name of Parent/ Guardian if applicable	Printed Last Name of Parent/Guardian	Date		

#### Teen Leadership Council Member Off-site Service Report

Name\_\_\_\_\_\_For the Month of: \_\_\_\_\_

maine_				For the Month of	
Day	Date	#Hours	Description of Work Performed	Staff Signature	RECREATION & PAR
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
13. 14.					
15.					
16.					
17.					
18.					
19.					
20.					
20. 21.					
<ul><li>22.</li><li>23.</li><li>24.</li><li>25.</li><li>26.</li></ul>					
23.					
24.					
25.					
26.					
27.					
28.					
29.					
30. 31.					
31.					