

Paradise Hills Community Center Parky's Pals Acknowledgment

Parky's Pals Recreation Program is Monday – Thursday from 9 am – 12 pm. Payments are due every 4 weeks at the beginning of a new session.

Paradise Hills Community Center provides transportation to and from any fieldtrips that have been scheduled. Paradise Hills Community Center does not provide transportation to and from home and the center. A fieldtrip permission form for every trip is needed.

Emergency Procedures

All incidents or accidents, severe will be documented and filed at the center and with the Bernalillo County Risk Management Department. For minor incidents, the situation is addressed and parents are informed.

Guidance Policy & Procedures

1. Children are always warned, corrected & redirected
2. Second warning is given
3. Two to five minutes in time out
4. Child will be taken to the office and parent will be notified by incident report or phone call if needed
5. Conference with parent and possible suspension in necessary.
6. Any fighting or physical attacks to a participant or staff by another participant will be called to the parent's attention; there could be grounds for suspension if the behavior persists

Sick Policy

If your child is sick with fever he or she will not be able to attend the Parky's Program for that day in order to prevent exposure to other students and teachers. Please report any immediately. Under state law, it is the parent's responsibility to pick up their child if he or she becomes sick at school. Make sure that emergency numbers are current, as staff and other office personnel are not able to care for children. Children may only be released to parents, unless you notify the office that someone else is to pick them up. If you are taking your sick child home, please be sure to sign him/her out before leaving Paradise Hills Community Center

Medication Policy

Paradise Hills Community Center - Bernalillo County Parks and Recreation cannot dispense or store any type of medication for participant. If you have any concerns on the matter please contact the office at 468-7800.

_____ I have received a Parky's Pals Parent Handbook. (initial)

By signing this form, I understand and agree to the policies and payments set forth upon this document.

Child's Name _____

Father/Guardian signature and date _____

Mother/Guardian signature and date _____