

SYCAMORE MAGNET ACADEMY WALKING PROGRAM

Application

RAIN
OR
SHINE



TUSTIN FAMILY AND YOUTH CENTER PARKS AND RECREATION

Eligibility Requirements:

- The student must be enrolled at Sycamore Magnet Academy.
- A completed application for the Tustin Family and Youth Center Afterschool Program must be on file.
- The student must be in 1st through 5th grade to be eligible.
- If a student will be absent from school, it is the parent's responsibility to notify the Tustin Family and Youth Center at least one hour before the scheduled pick-up time by calling (714) 573-3370.

ASSUMPTION OF RISK AND LIABILITY

I, the undersigned, acknowledge that in consideration of my involvement in:

Authorize TFYC Staff to pick-up, walk, and/or drive your child from Sycamore Academy to TFYC after school program.

(herein referred to as "the Activity"), that I, for myself, my personal representatives, heirs, next of kin, spouse and assigns, do hereby:

1. **RELEASE, DISCHARGE AND COVENANT NOT TO SUE THE CITY OF TUSTIN, ITS EMPLOYEES, OFFICERS, COUNCILMEMBERS, AND AGENTS** (hereinafter collectively as "the City") for and from any and all claims and liability arising out of strict liability, dangerous condition of public property and/or ordinary negligence which may cause injury, death, damages or property damage to myself. I hereby agree to indemnify and hold the City harmless from any claim, judgment, or expense the City may incur which may arise out of my participation in the activity.
2. Acknowledge that the Activity is inherently dangerous and that I participate at my own risk. I further understand that the Activity contains risks of minor injuries, serious injuries, and even death, and that other participants in the Activity pose a danger to me. Nevertheless, **I VOLUNTARILY ELECT TO ACCEPT ALL RISKS** connected with my participation in the activity.
3. Acknowledge that no oral representations or inducements have been made to me to sign this Agreement. If any portion of this Agreement is held invalid, it is agreed that the balance thereof shall continue in full legal force and effect.
4. Agree that this agreement shall apply to any incident, accident, injury, or death occurring during my participation in the activity.

I HAVE READ THIS DOCUMENT. I UNDERSTAND THAT IT IS A RELEASE OF ALL CLAIMS.



_____ (Guardian Initials)
_____ (Student Initials)

This agreement is intended to be binding on myself, my heirs, personal representatives, next of kin, spouse and assigns .

I VOLUNTARILY SIGN MY NAME EVIDENCING MY ACCEPTANCE OF THE ABOVE PROVISIONS



Student Signature Here:

Dated: _____
Applicant's Name (Print): _____
Signature of Applicant: _____

IF APPLICANT IS A MINNOR:

I certify that I am the legal parent/guardian of (student's name) _____ and that by signing this Agreement I am agreeing to and acknowledging its provisions. Further, I have explained he nature and significance of this Agreement to my child and he/she understands the same.



SIGNATURE OF PARENT: _____

PROGRAM AGREEMENT

- Students enrolled in the Walk-In Program are expected to check in with staff by 2:30 PM. This allows a 10-minute window for any necessary errands. If a student does not arrive by this time, it will be their responsibility to notify the staff. Additionally, if we do not receive a call from a parent/guardian by 1:30 PM, we will assume the student is absent from school, allowing the program to continue without further delay. These rules will also apply during early release days, with a modified time frame.
- I acknowledge and fully understand that my child will be enrolled in the Tustin Family and Youth Center walking program. I have been informed that it is my responsibility to notify the **front desk (714) 573-3370** an hour before the scheduled pickup time if my child will not be getting picked up by the walking program. I hereby acknowledge that if my child has reached the three unexcused pickup absences, they will be removed from the walking program. Unexcused pickup absences include no-call no-shows and not calling an hour before the scheduled pickup time , only if my child will not be getting picked up by the walking program

I confirm that I have read and understood the contents of the letter above:

Student Information:

Student's Name Print

Date

Student's Signature

Guardian Information:

Guardian's Name Print

Date

Guardian's Signature

Student's Pick-Up Schedule

Please complete the table below with the student's availability.

Monday	
Tuesday	
Wednesday	
Thursday	
Friday	

Parents are responsible for keeping their student's pick-up schedule up to date.

For example, if the student will not need pick-up on Tuesday due to a sports activity, please write "No pick-up" for that day.

Monday	Pick-up
Tuesday	No Pick-Up
Wednesday	Pick-Up
Thursday	Pick-Up
Friday	Pick-Up