



Saginaw Chippewa Indian Tribe
Department of Recreation
Future Leaders Program
Tribal Operations Eagles Nest Gym
7070 E. Broadway Mount Pleasant MI, 48858



Application for Admission
K-6

Dear Parents & Guardians:

Thank you for selecting the Future Leaders Program as your choice to educate your child in a structure afterschool program. This is a responsibility that SCIT Recreation Staff take seriously. The check-off list on the next page can be used as a guide for completing this application. The Future Leaders Program will also charge a small fee to offset cost for food.

Falsification or withholding any information in this application will be grounds for non-acceptance or revocation of your child's admission.

Make sure ALL necessary copies of documents are attached. Incomplete application packages will not be reviewed. The Recreation staff will review and notify each applicant by mail or phone as to the status of his or her application. Complete application packages will be reviewed in order of submission.

We look forward to providing a safe and healthy environment for our youth. Our goal is to increase opportunities for our youth to try new experiences and to encourage them to take part in activities together, supporting one another. Our Department looks forward to becoming part of your child extended family.

Sincerely,

David Merrill Jr. - *Youth & Family Recreation Specialist*



Saginaw Chippewa Indian Tribe of Michigan
“Working Together for Our Future”

7070 E. Broadway
Mount Pleasant, MI 48858
989-775-4000
www.sagchip.org

Dates and info: Registration is from August 26, 2016 to September 16th, 2016; The SCIT Future Leaders Program will be starting August 29th, 2016 and will run through the school year (excluding school cancellations, breaks holidays and all tribal operation closures). There will be MEAL PLAN registration fee of \$50.00 per semester or \$75.00 for the year for the. The MEAL PLAN includes: Snacks and refreshments will be available for the youth daily in the tribal community kitchen. All youth are welcome to any activities and services available in the Eagles nest. This includes Homework lab, Tribal Library, Gym, and the Lounge.

The program will run from 3:00 pm-5:00pm on regular full school days, all children must be signed out by 5:30 pm. The program will not run on half days or early outs; there will be scheduled activities for the participants who check in for the day. To ensure the safety of the children enrolled in the program, all children in the Waa-ne-nii-gaan-gab-wi-jik program must be signed out.

Student Enrollment Application

1	Cover Letter
2	Check List
3-5	Student Enrollment Application
6	Liability Waiver Statement & Medical Consent
7	Legal Custody Form
8	Student Checkout Policy
9-10	Student Policies
11-12	Using Images of Children Parent Consent Form
13	Review

RECREATION MUST HAVE A COPY THE FOLLOWING TO REVIEW THE APPLICATION:

- Tribal Enrollment (Tribal ID or Employee ID) for Tribal Members, Descendants, SCIT Tribal Employee Families
- Copy of birth certificate
- Copy of medical insurance card (front and back) – if student is covered
- Court documents for legal custody for parent or legal guardian
- MEAL PLAN Payment - \$50 per semester or \$100 for the year

ENROLLMENT INFORMATION

Name of school: Please circle

<ul style="list-style-type: none"> <input type="radio"/> Fancher Elementary <input type="radio"/> Vowles Elementary <input type="radio"/> Ganiard Elementary <input type="radio"/> Pullen Elementary <input type="radio"/> McGuire Elementary 	<p style="text-align: center;">Shepard Public Schools</p> <ul style="list-style-type: none"> <input type="radio"/> SHEPHERD ELEMENTARY SCHOOL
<p style="text-align: center;">Renaissance Public School Academy</p> <ul style="list-style-type: none"> <input type="radio"/> Renaissance Academy 	<p style="text-align: center;">Saginaw Chippewa Education Department</p> <ul style="list-style-type: none"> <input type="radio"/> Saginaw Chippewa Academy
<ul style="list-style-type: none"> <input type="radio"/> Other _____ 	

Grade & Teacher

Grade: _____ Teacher: _____

Organized Sports

Currently participating in:	Interested in:
Baseball	Baseball
Basketball	Basketball
Bowling	Bowling
Cross Country	Cross Country
Football	Football
Golf	Golf
Hockey	Hockey
Ski	Ski
Soccer	Soccer
Softball	Softball
Swimming	Swimming
Tennis	Tennis
Track	Track
Volleyball	Volleyball
Wrestling	Wrestling
Other _____	Other _____

STUDENT INFORMATION

Full Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: () _____ Student Cell Phone: _____

Date of Birth: _____ Age: _____

Do you live with: (circle) Mother Father Legal Guardian/Other

Gender: (circle) Male Female Tribal Affiliation: _____

Tribal Agency: _____ Enrollment Number: _____

PARENT OR LEGAL GUARDIAN INFORMATION

Father's Name: _____ Tribal Affiliation: _____

Address: _____ City: _____ State: _____ Zip: _____

Father's Work Phone: () _____ Father's Cell Phone: () _____

Mother's Name: _____ Tribal Affiliation: _____

Address: _____ City: _____ State: _____ Zip: _____

Mother's Work Phone: () _____ Mother's Cell Phone: () _____

Legal Guardian (if not parent):

If you are the court appointed custodial parent, you must attach appropriate documentation. If the student does not live with either parent or is a ward of the court, attach documentation and provide information on the person(s) responsible for the applicant who will be the primary contact person. A student may not list himself/herself as guardian even if he/she is 18 years of age or older.

Address: _____ City: _____ State: _____ Zip: _____

Guardian's Work Phone: () _____ Guardian's Cell Phone: () _____

EMERGENCY CONTACT

INFORMATION (other than listed guardian)

Name: _____ Relationship: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____

Name: _____ Relationship: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____

HEALTH INFORMATION

Physician: _____ Phone: _____

Medication(s) being taken by child:

Physical conditions: (allergies, diabetes, ect.)

Insurance Information- Policy Holder Name _____

Insurance Company: _____ Policy # _____

Group # _____

Signature

I am legally responsible for this student and hereby apply for his/her admission to the Future Leaders Program. I understand that the program may request additional information before the student is admitted.

Signature of Parent/Legal Guardian: _____ Date: _____

Failure to provide inclusive and accurate information may result in immediate dismissal from the Future Leaders Program.

Saginaw Chippewa Indian Tribe

Recreation Department

Liability Waiver Statement & Medical Consent

The undersigned, in participating in athletics or trips with the Saginaw Chippewa Indian Tribe, does so at his/her own risk. Saginaw Chippewa Indian Tribe, their employees, and agents shall not be liable to the undersigned, his/her heirs, executors, administrators, or assigns for any damage arising from personal injuries or death sustained by the undersigned during his or her participation from any cause whatsoever. Signing this form indicates your recognition and understanding of the responsibilities and hazards inherent in your participation. My child has been seen by a doctor and was determined to be healthy enough for competitive competition. Should injury occur during participation staff will make arrangements for emergency transportation. In the event reasonable attempts to contact me at the emergency numbers listed below have been unsuccessful, I hereby give my consent for (1) the administration of any treatment deemed necessary by a licensed physician or medical personnel; (2) the transfer of the child to hospital for treatment. I understand I am responsible for financial obligations incurred.

Please confirm with your signature that you have read this information, that you understand your responsibility as a participant, and that you assume all risks incidental to the Saginaw Chippewa Indian Tribe.

I hereby give permission for my child, _____, to participate in athletic events and trips with the Saginaw Chippewa Indian Tribe.

DATE

X

Print Parent Name

PARENT OR LEGAL GUARDIAN SIGNATURE

STUDENT PICK UP/CHECK OUT POLICY

Saginaw Chippewa Indian Tribe Recreation Department, policy prohibits students from leaving the Future Leaders Program with anyone other than the parent/guardian unless written consent is on file, and only under the following conditions:

- A student may be released only to individuals who are 18 years or older with written parental/guardian permission.**
- Students will not be released to anyone under the influence of drugs or alcohol.**
- Recreation staff and management may also choose not to release students when other conditions warrant.**

Individuals wishing to check out a student must appear at the front desk and follow the school's checkout procedures. The person will be asked to present photo identification for identification purposes.

Pickup from anyone that's not on the list must be prearranged with the Saginaw Chippewa Recreation Office located above the tribal gym. There is a fifteen minute grace period for the student to be picked up. If the student is not picked up by 5:45pm and all contacts have been tried with no success, then the student will be taken to Saginaw Chippewa Tribal Police. If this occurs more than twice in a week, without a legitimate excuse than the student will be dismissed from the program.

Please list people who you authorize to pick up your child/children, from the Future Leaders Program.

1. Name: _____
 Address: _____
 Home Phone: _____ Work Phone: _____
 Cell Phone: _____
 Relationship to Student: _____
2. Name: _____
 Address: _____
 Home Phone: _____ Work Phone: _____
 Cell Phone: _____
 Relationship to Student: _____
3. Name: _____
 Address: _____
 Home Phone: _____ Work Phone: _____
 Cell Phone: _____
 Relationship to Student: _____

Legal guardians do have the option to allow their child (**13 and older**) to sign themselves out of the program by signing and checking the box below:

I give my child permission to sign his/her self out of the Future Leaders program.

Signature of Legal Guardian: _____ Date _____

Students will be required to sign in each day upon arrival. Once a student arrives at the Eagle's Nest, they must be signed out by a legal guardian or designated pick up person listed above in the student pick up/check out policy. If the student chooses to leave on their own without permission the Tribal Police will be notified, the legal guardian will be notified, and the student will not be eligible to return to the Future Leaders Program for one week. If your child does not attend school or gets sent home from school for any reason, ill, bad behavior, suspended from school, etc., your child is not allowed to attend the Future Leaders Program that day as well.

BEHAVIOR POLICY

NEGATIVE VERBAL BEHAVIOR or Inappropriate Language will result in the following consequences.

1st Infraction – Verbal Warning

2nd Infraction – A Legal Guardian will be called. The student may return on the next scheduled program day.

*If the 2nd infraction occurs on a field trip, the child will not be able to attend the next scheduled field trip.

3rd Infraction – Dismissal from the program. (1st half of the year/2nd half of the year)

If the student plans attending the program again, a behavior plan will have to be developed and a meeting will have to take place between the Legal Guardian & Youth Activities Recreation Manager before the student will be allowed to attend the next semester.

NEGATIVE PHYSICAL BEHAVIOR

1st Infraction – if the incident is witnessed by a staff member, a Legal Guardian will be called to pick up the student from the program. The Student is welcome to return after five (5) scheduled days. If the incident occurs on a trip, the student is welcome to return after five (5) scheduled program days and the student will not be eligible for the next scheduled trip.

2nd Infraction – Dismissal from the program.

BULLYING NO TOLERANCE POLICY

Bullying of any kind will not be tolerated in our facility. If a bullying incident occurs, all parties involved Legal Guardians' will be called so that it is quickly resolved. The guilty perpetrator will be dismissed from the program. Counseling would be suggested to all involved.

Definition of Bullying is the use of force or coercion to abuse or intimidate others. The behavior can be habitual and involve an imbalance of social or physical power. It can include verbal harassment or threat, physical assault or coercion and may be directed repeatedly towards particular victims, perhaps on grounds of class, race, religion, gender, sexuality, appearance, behavior, or ability. If bullying is done by a group, it is called mobbing. The victim of bullying is sometimes referred to as a "target".

Bullying can be defined in many different ways. Bullying consists of four basic types of abuse – emotional (sometimes called relational), verbal, physical, and cyber. It typically involves subtle methods of coercion such as intimidation.

Bullying ranges from simple one-on-one bullying to more complex bullying in which the bully may have one or more "lieutenants" who may seem to be willing to assist the primary bully in his or her bullying activities. Bullying in school and the workplace is also referred to as peer abuse.

A bullying culture can develop in any context in which human beings interact with each other. This includes school, family, the workplace, home, and neighborhoods.

ALCOHOL/DRUGS POLICY

This is an alcohol and drug free facility. If anyone is caught with alcohol or drugs, the Tribal Police will be notified immediately, followed by a phone call to a Legal Guardian. This will result in an immediate dismissal from the afterschool program.

Signature of Legal Guardian: _____ Date: _____

These rules are to ensure the safety and integrity of all participants involved with the Waa-ne-nii-gaan-gab-wi-jik Program. The Policy's will be enforced so that all participants can enjoy the program. If you have any questions, concerns, or need further explanation of these rules please contact Lucas Sprague Recreation Manager at LuSprague@Sagchip.org

USING IMAGES OF CHILDREN**CONSENT FORM FOR USE BY SCIT RECREATION DEPARTMENT****Parent/Guardian Information:**

Name: _____ Home: _____ Work: _____

Cell: _____ E Mail: _____

Name of child: _____

Occasionally, we may take photographs of the children at our facility. We may use these images in printed publications that we produce, as well as on our website or on project display boards at our facility. We may also make video or webcam recordings for department conferences, monitoring or other educational use.

From time to time, our facility may be visited by the media who will take photographs or film footage of a visiting dignitary or other high profile event. Pupils will often appear in these images, which may appear in local or national newspapers, or on televised networks.

To comply with Data Protection Act 1998, we need your permission before we can photograph or make any recordings of your child for promotional purposes. Please answer questions 1 to 4 below, then sign and date the form where shown.

Please return the completed form to the Saginaw Chippewa Recreation Department as soon as possible.

Please circle your answer

1. May we use your child's photograph in the printed publications that we for promotional purposes or on project display boards? Yes / No
2. May we use your child's image on our website? Yes / No
3. May we record your child's image on video or webcam? Yes / No
4. Are you happy for your child to appear in the media? Yes / No

Please also note that the conditions for use of these photographs are on the attached form.

I have read and understood the conditions of use.

Parent's/Guardian's signature: _____ **Date:** _____

CONDITIONS OF IMAGE USE:

1. This form is valid for one year from the date you sign it. The consent will automatically expire after this time.
2. We will not use the personal details or full names (which means first name and surname) of any child or adult in a photographic image or video, on our website, in any of our printed publications without good reason. For example, we may include the full name of a child in a newsletter to parents if the child has won an award.
3. If we name a child in the text, we will not use a photograph of that child to accompany the article without good reason.
4. We will not include personal e-mail or postal addresses, or telephone fax numbers on video, on our website, in printed publications.

This is to ensure the privacy and identity theft, of anyone involved.

**Thank you for enrolling your child in the
Waa-ne-nii-gaan-gab-wi-jik “Future Leaders” program!
Below you will find important information regarding the new program.**

- The program runs from 3pm-5pm on regular full school days. You will have until 5:30pm to sign-out and pick up your child if they have not been giving signed permission to sign themselves out. But know that no activities will be held after 5pm so your child will be waiting at the pick-up door located on the North-West Entrance of the Gym.
- **Closed days:**
 - The program is not open on Saturday’s and Sunday’s.
 - We follow the Tribal Operations calendar (Not school calendar). If Tribal Operations is closed then so are we, this includes weather related closings. Please refer to the Tribal Ops Holiday schedule for closed days.
- **Snack:**
 - A healthy free snack will be provided daily to the kids. Such as a banana or apple.

If you have any questions please contact:

**Lucas Sprague
LuSprague@sagchip.org**

Or

**Recreation Staff
RECREATION@Sagchip.org**



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