



# CITY OF PINOLE

Recreation Department

635 Tennent Ave.  
Pinole, CA 94564  
Phone: (510) 741-2999  
FAX: (510) 724-1528  
[www.ci.pinole.ca.us/recreation](http://www.ci.pinole.ca.us/recreation)

**IF YOUR CHILD DID NOT ATTEND THE SUMMER 2014, A CURRENT UTILITY BILL AND CHILD'S BIRTH CERTIFICATE MUST BE PRESENTED AT THE TIME OF REGISTRATION.**

## HOW TO REGISTER FOR A PINOLE RECREATION CLASS

For registration forms, please feel free to download at <http://www.ci.pinole.ca.us/youth>. You may also pick up paper copies at the Pinole Youth Center, or email [youth@ci.pinole.ca.us](mailto:youth@ci.pinole.ca.us) to have one sent to you electronically.

### 1. ONLINE

Go to the City of Pinole website: [www.ci.pinole.ca.us](http://www.ci.pinole.ca.us)

On the home page, scroll down to the bottom of the screen. Click on the "Online Rec Registration" icon and follow the prompts. Please contact Youth Center Office at 510-724-9004 for forgotten PIN and Login ID before creating new account.

### 2. BY MAIL

Fill out the registration form and enclose a check payable to the City of Pinole or, once paperwork is submitted, call to make payment by telephone.

Mail the completed form to: Pinole Recreation Dept., 635 Tennent Ave., Pinole, CA 94564

### 3. BY FAX

Fill out the registration form and fax them to: (510) 724-1528. Complete the payment by telephone or mail/drop payment to the Pinole Youth Center.

### 4. IN PERSON

Registration may be completed in person at the Pinole Youth Center at 635 Tennent Ave., Pinole.

Youth Center Office hours vary, please call (510) 724-9004 prior to coming, or email [youth@ci.pinole.ca.us](mailto:youth@ci.pinole.ca.us) to schedule an appointment.

### Payment Information

Registration is based on a first come, first served basis. Payments are non-refundable and programs may not be prorated for irregular attendance.

AFTER SCHOOL PROGRAM: Fees are due no later than 5pm on the 20<sup>th</sup> of each month prior to child's expected attendance. Example: Payment is due January 20<sup>th</sup> for February registration. Late fees will be enforced.

DAY OFF AND BREAK WEEK CAMPS: Includes Summer Camp Programs. Fees are due no later than 5pm on the Wednesday before child's expected attendance. Late fees will be enforced.

Financial Aid is not available. LIT's must submit an LIT application, registration packet, and satisfactorily complete an interview. We accept the following forms of payment: Visa and MasterCard, Checks, Money Orders, and Cash.

### Tax Information Notice

Please keep a copy of your registration forms and receipts for tax purposes. **Our Tax ID number is 94-6000394.**

### Late Pick Up Policy

Any child picked up later than the program end time will be charged \$1 per minute after an initial grace period of 5 minutes. This fee is payable at the program site when the child is picked up.

**In signing this form I understand and agree to the above policies and procedures. I agree to pay all fees associated with program registration. I have read, understand, and agree to all policies outlined in the *Parent Guardian Handout*. I understand that completion of this form is required for me or my child to participate in the City of Pinole activities, and a new form is required each school year.**

Printed Name

Signature

Date



**CITY OF PINOLE RECREATION DEPARTMENT Registration Form**  
635 Tennent Ave., Pinole, CA 94564  
Phone: (510) 741-2999 • Fax: (510) 724-1528 • recreation@ci.pinole.ca.us

Adult Name: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

| Participant Name              | Date of Birth | Grade & School | Activity | Start Date |
|-------------------------------|---------------|----------------|----------|------------|
|                               |               |                |          |            |
| Participant Cell Phone: _____ |               |                |          |            |
|                               |               |                |          |            |
|                               |               |                |          |            |

**Emergency Contact Information**

1) Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_  
Home Work Other (cell, pager, etc.)

2) Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_  
Home Work Other (cell, pager, etc.)

**Medical Information**

Medical Carrier: \_\_\_\_\_ Allergies: \_\_\_\_\_

Other Necessary Medical Information: \_\_\_\_\_

Include information on back as necessary. Include medications. Please provide Coordinator with any medications in original packaging, with direction for use, prior to child's attendance.

**Completion of this Release Form is a prerequisite for participation in City of Pinole Recreation activities.**

**Consent to Treat:** I hereby give my consent for the City of Pinole staff and instructors to take me (or my child/ward) to the appropriate medical services and give appropriate medical authorization in the event that I cannot be immediately contacted. It is understood that the cost thereof will be at my expense. If a physician is listed above, every effort will be made to contact such physician. However, the location of the activity or the nature of the injury or illness may require the use of emergency medical personnel.

I do not give my consent to treat and I request that medical or surgical services be withheld.

**Photo Consent:** By signing this registration form, you authorize the City of Pinole to use your name (or child's/ward's name) and/or photograph in any future educational and/or community informational purposes, either printed or otherwise (including, but not limited to, use on the city's website and on its public television station) produced by the City of Pinole. Further, there is no monetary compensation for this consent.

Check here only if you do not give photographic consent.

**Liability Waiver:**

- 1) I understand that my (or my child's) participation in City of Pinole activities may involve the risk of harm.
- 2) With knowledge of the potential risks involved, I hereby release and discharge the City of Pinole or City of Pinole officials, officers, employees, agents, volunteers, or appointees, including, without limitation, appointees sitting as Youth Commission Members, Community Services Commission Members, Pinole Area Senior Foundation Board Members or Pinole Youth Foundation Board Members ("Indemnities"), WCCUSD School District, Shannon Elementary School, or its Employees, from any and all claims arising from my participation in City of Pinole Recreation Department activities, except when such claims arise from the gross negligence or willful acts of the Indemnities.
- 3) I hereby certify that I (or my child) is physically and mentally capable of participating in Pinole Recreation activities at or sponsored by the City of Pinole.

Printed Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

|   |          |          |          |
|---|----------|----------|----------|
| <b>PINOLE RECREATION OFFICE USE ONLY:</b> | PG _____ | PR _____ | PP _____ |
|---|----------|----------|----------|

PINOLE YOUTH CENTER  
BEHAVIOR CONTRACT

PLEASE ONLY FILL OUT IF YOU ARE A NEW APPLICANT

**1. RESPECT EACH OTHER AND RESPECT DIVERSITY**

No put-downs, swearing or fighting. Respect everyone's personal and public property. Do not use others' property.

**2. SAFE AND SOBER SPACE**

Absolutely no smoking, drugs, alcohol, and weapons are allowed anywhere in or around the Youth Center, regardless of age.

**3. BE NICE AND PLAY FAIR**

Play fighting/wrestling, fighting, destructive behavior, and comments are not tolerated.

**4. THE YOUTH CENTER BELONGS TO EVERYBODY**

Share... It's for all of us. Help keep your Youth Center clean. Clean up trash and put away what you use.

**5. APPROPRIATE BEHAVIOR AT THE YOUTH CENTER**

Listen to the staff, be aware of your surroundings, and behave appropriately in public.

**6. STAY IN THE PROGRAM BOUNDARIES**

This includes the Youth Center and on field trips.

**DISCIPLINE PROCEDURES**

If a rule or policy is violated the following steps will be taken:

- The staff will discuss the violation with the youth participant and give an appropriate warning with clear consequences if their behavior continues.
- If the behavior does continue or is initially severe enough, the staff will contact the parent/guardian and remove the youth from the situation as needed.

The staff reserves the right to suspend or expel a youth participant from the program at any time based on the severity of their actions. The parent/guardian will always be contacted when this step is taken. This policy is to ensure the safety of youth, staff members, volunteers, and the general public.

\_\_\_\_\_ I have read the Discipline Procedures and understand that if I do not follow the rules my parent/guardian will  
*youth initials* be contacted and I will be disciplined based on the severity of my behavior.

\_\_\_\_\_ I have read the Youth Center Rules and I agree to follow them.  
*youth initials*

\_\_\_\_\_ I agree to listen and show respect to all Youth Center staff  
*youth initials*

\_\_\_\_\_ I agree to respect all youth center participants  
*youth initials*

Print Youth Name \_\_\_\_\_

Youth Participant Signature \_\_\_\_\_

**PINOLE YOUTH CENTER  
CHILD PICK-UP PROCEDURE**

**PLEASE ONLY FILL OUT IF YOU ARE A NEW APPLICANT OR HAVE UPDATES**

Please specify below whether your child will have permission from you as their legal guardian to leave the Pinole Youth Center by them self, or with another adult you have specified below, or if you choose to waive this right and will sign them out on a daily basis.

Please check one of the following boxes:

I agree that my designated person(s) or I will come into the Pinole Youth Center to sign my child \_\_\_\_\_ **Child's Name** \_\_\_\_\_ out on a daily basis.

I agree that my child \_\_\_\_\_ **Child's Name** \_\_\_\_\_ may leave on his/her own the following designated days without my signing out. I understand that Pinole Youth Center is not responsible for my child once they sign them self out and they leave the Pinole Youth Center Building for that day.

| <b>Monday</b>           | <b>Tuesday</b>      | <b>Wednesday</b>       | <b>Thursday</b>          | <b>Friday</b>          |
|-------------------------|---------------------|------------------------|--------------------------|------------------------|
| <i>ex. Leave @ 5:30</i> | <b>Leave @ 6:00</b> | <i>I will Sign Out</i> | <i>John Doe Sign Out</i> | <i>I will Sign Out</i> |
|                         |                     |                        |                          |                        |

The following person(s) may sign my child out:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

I understand that I may at any time change my mind and will fill out this form again to specify any change for my child. I understand that the Pinole Youth Center closes 15 minutes after the program time ends and that my child will no longer be supervised by Pinole Youth Center staff, will be asked to wait outside regardless of weather, and that Pinole Youth Center is not liable for my child.

\_\_\_\_\_  
(Parent/Guardian's Name – printed)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Parent/Guardian's Signature)