



# DROPZONE 2.0

The Del Norte DropZone is a redesigned after school program that provides a safe and positive environment for children in pre-school through 7th grade.

With a variety of session types to choose from, we offer Zoom assistance, an hour of focused homework time, daily outside games and activities, healthy snacks, and much more!

**REGISTER TODAY!**



## **DropZone Information**

- Grades Pre-school-7th
- We have a variety of program sessions to choose from: Half Day AM, Half Day PM, Homework Help, and Drop-in.
- There is a limit of 10 students per session. A minimum of 6 students per session must be met in order to hold the program.
- Pricing includes, Zoom assistance, daily outdoor recreation, creative projects, homework help, afternoon snack, and social distanced activities.
- This is a fluid program that is subject to change as we will be following CDC, state, and local health guidelines as well as keeping up with new information from the school districts.
- We will be following proper social distancing & sanitation protocols. Our staff has been extensively trained to provide the safest environment possible.
- For questions: Please contact Sarah Eaton at sarahe@delnorteclub.com

## **DropZone Pricing**

<u><b>AM Session (pre-school-4th)</b></u> Monday-Friday 8:00am-12:30pm	This session focuses on Zoom assistance, outdoor recreation, games, crafts, & more!  <b>Members: \$125/week</b>
<u><b>PM Session (1st-7th)</b></u> Monday-Friday 1:00pm-5:30pm	This session focuses on Homework help, outdoor recreation, games, crafts, & more!  <b>Members: \$125/week</b>
<u><b>Homework Help (HH) Session</b></u> Monday-Friday <b>HH1</b> 12:00pm-2:00pm or <b>HH2</b> 3:00pm-5:00pm	This shortened session's main focus is getting homework done with one full hour of assisted homework time. The rest of the session is spent doing recreational activities.  <b>Members: \$60/week</b>
<u><b>Drop-in Session</b></u> Wednesdays 9:00am-5:00pm	This session is held every Wednesday for parent's not needing care all week long. We focus on Zoom sessions, homework help, recreation & more!  <b>Members: \$45/full day drop-in</b>

PLEASE SUBMIT A SCANNED COPY OF THE COMPLETED REGISTRATION FORMS TO OUR CHILDREN'S DIRECTOR OR BRING THEM TO DEL NORTE CLUB.

\*CONTACT US FOR NON-MEMBER PRICING.

**CHILDREN'S DIRECTOR EMAIL: SARAHE@DELNORTECLUB.COM**

Call us at 916-483-5111 or visit delnorteclub.com

# **Del Norte DropZone Registration Form**

## **Student Information:**

Name(s): \_\_\_\_\_ Age: \_\_\_\_\_ D.O.B. \_\_\_\_\_

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

Current School & Grade: \_\_\_\_\_

## **Parent(s) Information:**

Name(s): \_\_\_\_\_

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

E-Mail: \_\_\_\_\_ Member: \_\_\_\_\_ Non-Member: \_\_\_\_\_

## **DropZone Session and Fees**

Fill out the section below. Please refer to the previous page for pricing, session types and times. A \$25 deposit is required to secure a program space.

Session Number	Session Dates	Session Type	Number of Kids
<input type="checkbox"/> #1	9/28-10/2	<input type="checkbox"/> AM <input type="checkbox"/> PM <input type="checkbox"/> HH1 <input type="checkbox"/> HH2 <input type="checkbox"/> Drop-in	
<input type="checkbox"/> #2	10/5-10/9	<input type="checkbox"/> AM <input type="checkbox"/> PM <input type="checkbox"/> HH1 <input type="checkbox"/> HH2 <input type="checkbox"/> Drop-in	
<input type="checkbox"/> #3	10/12-10/16	<input type="checkbox"/> AM <input type="checkbox"/> PM <input type="checkbox"/> HH1 <input type="checkbox"/> HH2 <input type="checkbox"/> Drop-in	
<input type="checkbox"/> #4	10/19-10/23	<input type="checkbox"/> AM <input type="checkbox"/> PM <input type="checkbox"/> HH1 <input type="checkbox"/> HH2 <input type="checkbox"/> Drop-in	
<input type="checkbox"/> #5	10/26-10/30	<input type="checkbox"/> AM <input type="checkbox"/> PM <input type="checkbox"/> HH1 <input type="checkbox"/> HH2 <input type="checkbox"/> Drop-in	
<input type="checkbox"/> #6	11/2-11/6	<input type="checkbox"/> AM <input type="checkbox"/> PM <input type="checkbox"/> HH1 <input type="checkbox"/> HH2 <input type="checkbox"/> Drop-in	
<input type="checkbox"/> #7	11/9-11/13	<input type="checkbox"/> AM <input type="checkbox"/> PM <input type="checkbox"/> HH1 <input type="checkbox"/> HH2 <input type="checkbox"/> Drop-in	
<input type="checkbox"/> #8	11/16-11/20	<input type="checkbox"/> AM <input type="checkbox"/> PM <input type="checkbox"/> HH1 <input type="checkbox"/> HH2 <input type="checkbox"/> Drop-in	

I would like session fees to be charged to my Del Norte account. Initials: \_\_\_\_\_

# **DropZone Program Agreement**

- **COVID-19 Response:** Please do not bring your child to Del Norte's DropZone if they are sick. Daily sign-in will take place outside of kids loft and temperatures will be checked upon arrival. Please wash your hands and sanitize before entering the building. Staff will wear masks when needing to make close contact with students. Students must bring a mask each day, but will not be required to wear masks as long as they maintain 6 feet apart. Extra cleaning and sanitation procedures have been put in place to ensure the safest program environment possible. Social distancing will be encouraged and daily non-contact games & activities are planned. Daily activities, session dates, pricing and details are subject to change as we will be following CDC, state, and local health guidelines as well as keeping up with new information from the school districts.
- **Cancellation and refunds:** There are no refunds for missed program days. In order to qualify for a refund, participants must notify the Program Director of cancellation fourteen (14) days prior to the beginning of the registered session. All program deposits are non-refundable.
- **Behavior:** Children must abide by all DropZone rules at Del Norte. Each child must behave appropriately toward other students, members, and Del Norte staff at all times. Failure to do so will result in disciplinary action by program staff and/or the Program Director. Inappropriate behavior will result in dismissal from the program without a refund in program fees.
- **Attire:** Students should dress in play clothes and athletic shoes. Sandals are OK as long as students bring a pair of athletic shoes with them.
- **Refreshments:** The program will provide one afternoon snack each day. Students must bring water bottles, as all drinking fountains are currently closed. The snack bar is open to purchase drinks only at this time. Please notify Program Director of any food allergies your child may have.
- **Attendance:** Parents must sign their children in and out daily. Children may not sign themselves in or out unless written consent has been approved by Program Director. Children must be picked up by the scheduled session end time each day or a late fee of \$20 will be charged.
- **What to bring daily:** Students are required to bring their **homework, water bottle, and face mask** on a daily basis. If your child is doing a Zoom session, please have them bring a **laptop or other Zoom compatible electronic device, headphones, provide login info, and daily homework schedule**. Each child should also bring a book or other quiet activity should they finish early, or not have any homework to complete. A swimsuit, towel, and sunscreen, will be requested on certain days for water activities.
- **Daily Schedule:** We have organized outdoor and indoor activities, weekly art projects, daily games, one hour of focused homework time, and afternoon snack time. If you are registered for a an AM session or drop-in session, please provide a lunch for your child. This schedule is subject to change as we continue to follow CDC, state, and local health guidelines. The program follows the San Juan Unified District school schedule and will not be open during school holidays.
- **Payment Policies:** A \$25 deposit is required at time of sign-up to reserve your child's space in the program. Cash, check, or card payments are due by the **Monday** before each session and are payable to Del Norte. Members wishing to charge the program fees to their membership account, please initial the box on the registration page or see Program Director. If payments are not made on time, accounts will be automatically charged.
- **Photography Policy:** I give Del Norte permission to print and publish my child's picture for promotional purposes. I understand that I will not receive compensation for my child's picture.

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**Student Signature**

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**Parent/Guardian Signature**

## Del Norte DropZone Emergency Form

Child's Name \_\_\_\_\_ M / F Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ Home Phone \_\_\_\_\_

Parent's Name \_\_\_\_\_ Work Phone(s) \_\_\_\_\_

Cell Phone (s) \_\_\_\_\_

**If my child is ill or has an emergency and I cannot be reached, please contact:**

Name \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

**Person, other than parents, that is authorized to pick up child from club:**

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

**Please mark any of the following that apply to your child:**

Epilepsy: \_\_\_\_ Heart Condition: \_\_\_\_ Nose Bleeds: \_\_\_\_ Migraines: \_\_\_\_

Asthma: \_\_\_\_ **Allergies:** Bee Stings: \_\_\_\_ Peanuts: \_\_\_\_ Medication: \_\_\_\_

Please describe: \_\_\_\_\_

Physical Limitations: \_\_\_\_\_

Medications: \_\_\_\_\_ Current dosage: \_\_\_\_\_

Name of Insurance: \_\_\_\_\_ ID#: \_\_\_\_\_

Physician: \_\_\_\_\_ Phone: \_\_\_\_\_

Dentist: \_\_\_\_\_ Phone: \_\_\_\_\_

**Any other health problem we should know about to assure your child's well being?**

\_\_\_\_\_  
\_\_\_\_\_

I hereby give my permission for my child, \_\_\_\_\_, to participate in the Del Norte DropZone Program. In consideration for participation in this program, I release Del Norte, its owners, agents, and employees from any and all liability that may arise as a result of accident or injury, or sickness during the program. In the event of a medical emergency, I give my permission for a physician to provide the needed medical care for my child. I HAVE CAREFULLY READ THIS AGREEMENT, WAIVER, AND RELEASE AND FULLY UNDERSTAND ITS CONTENT. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND DEL NORTE AND I SIGN IT OF MY FREE WILL.

**x** \_\_\_\_\_

Parent's Signature

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Date