ALLAN HANCOCK COLLEGE
COLLEGE FOR KIDS (CFK) PARENT/GUARDIAN GUIDELINES

GENERAL INFORMATION

The College for Kids (CFK) program is designed to provide children with an enjoyable learning experience. The program does not provide high school or college credit. Grades are not given. Allan Hancock College is a large campus, so to ensure the safety of your child(ren), it is important that parents follow the check-in and pick-up guidelines explicitly. This program does not receive public funding. The program charges an enrollment fee to remain self-supporting, as required by state law.

CLASSROOM BEHAVIOR /DISCIPLINE POLICY

College for Kids strives to provide a fun, positive, and safe learning environment for young students. In order to maintain an environment conducive to learning, CFK students must meet program standards of good conduct and behavior. Disruptive behavior is not allowed. Failure to follow this code of conduct may result in dismissal from the program.

First Offense: Students will be given a verbal warning.

Second Offense: Parent/guardian will be contacted and student may be sent home. No refunds will be issued.

Third Offense: Student will be dismissed. No refunds will be issued.

AGES

The age requirements for each course vary from 4-18 years. Please consult the schedule carefully to ensure the student's age falls within the guidelines listed. All classes are coed unless otherwise noted.

REGISTRATION INFORMATION

Registration for CFK classes is currently not available online. Submit a paper copy of the Fee-Based & College for Kids Admission and Registration Form by mail, fax, or in-person to Community Education (bldg. S). Students must be pre-registered. No registration is taken in class. Registrations are taken on a first-come, first-served basis. If a class fills, students will be placed on a wait list in the order that their registration form was received. Parents are not allowed to sit-in or audit classes.

TRANSFERS

Please consider carefully when you select classes. Transferring fees to other classes is not allowed.

REFUND POLICY

If we cancel a class before the first meeting, a full credit will reflect on your account.
If you drop a class before the first meeting, you are entitled to a refund ONLY if you request a refund. You will receive a full refund of your class fee and material fees. Exceptions to the deadline may be allowed for extenuating circumstances occurring before the first day of class. To petition for an exception for a refund after class starts, please submit a letter of appeal and appropriate documentation to the Community Education office. No refunds will be granted for classes that you drop after the first day of class.

To obtain a refund, complete the *Refund Request* and drop forms at the Community Education office (bldg. S) within the established guidelines mentioned above.

SPECIAL NEEDS STUDENTS

Allan Hancock College is committed to assisting children with special educational needs who want to enroll in the CFK program. Please contact Chloe Stanley, Camp Coordinator at 922-6966 ext. 3596 to discuss needs at least 14 days prior to the start of class.

PARKING

Parking is available in designated Allan Hancock College (AHC) parking areas on the Santa Maria campus. These lots are located throughout the campus and will be located in the white stalls of the parking lot. Please note that parking is limited, and parents are not permitted to wait in the parking lot during camp hours. Parking Permits can be obtained in the S building on campus.

PICK-UP & DROP OFF

Parents are responsible for picking up their children on time. The parent takes full responsibility for delivering the student to class and picking up the student at the end of the class session. Parents are encouraged to have their child(ren) use the restroom and get a drink prior to the beginning of each class. If a child has permission to leave on his or her own, the parent needs to write and sign a letter giving authorization for the child to leave the class without a parent. Please give this letter to the class instructor and Camp Coordinator prior to the first day of camp.

MEDIA/PHOTOGRAPHY

Our classes often draw media interest and coverage. When you register your child(ren), you agree to permit photographs to be taken—or filming—of the student to be used for such promotional purposes.

MEDICAL INFORMATION

If your child has known allergies or other medical issues, please indicate on the Parent/Guardian Guidelines Form and submit to the Camp Coordinator the first day of class.

COLLEGE FOR KIDS

ADMISSION & REGISTRATION FORM

- Complete and sign this form. ONLY ONE FORM PER STUDENT. Form may be duplicated. Registration is **in-person only.**
- Location:Allan Hancock College, Community Education, Bldg. S, 800 S. College Dr., Santa Maria, CA 93454-6399
- Payment is accepted in the form of check, money order, or credit card. Cash is only accepted with walk-in registration. **Do not send cash in the mail.** Make check(s) payable to: AHC

Student's/Child's Legal Name _____ Sex ____ Birthdate _____

Street Address _____City _____ Zip Code _____

Home Phone No. _____Student's SSN or H Number._____

(necessary for registration)

Cell Phone No. _____ Email Address: _____

Student's Signature _____ Date: _____

Where parents can be reached in case of emergency:

Mother (name)_____ Address_____
Phone _____ Alternate Phone_____

Father (name)_____ Address_____
Phone _____ Alternate Phone_____

Parent's Email Address(optional) _____

In the event of emergency, notify the following person if parents cannot be reached:

Name _____ Phone _____

(Child's Name) _____ has my permission to participate in the Allan Hancock College (AHC), College for Kids program. The undersigned agrees to accept full responsibility for delivering the student to the class at the appointed hour and for picking up the student at the conclusion of each session. The undersigned agrees to hold Allan Hancock College and any officer or employees thereof harmless from any claim for injury to the above named minor arising out of or in any way connected with AHC College for Kids program. The college, its officers or employees, will not be held responsible in any way for the health, safety, or welfare of the student while enroute to or returning from any class or activity offered as a part of the AHC College for Kids program. The undersigned agrees to permit photographs to be taken of this student enrolled in the AHC College for Kids program to be used for promotional purposes.

I, the undersigned parent/guardian of _____, a minor, age _____, do hereby authorize Marian Medical Center or Lompoc Hospital as an agent for the undersigned consent to any X-ray, examination, anesthetic, medical or surgical diagnosis or treatment and hospital care which is deemed advisable by, and is to be rendered under the general or special supervision of any physician and surgeon licensed under the provisions of the medical staff when such diagnosis or treatment is rendered at said hospital.

Parent/Guardian Signature: _____ Date: _____

CRN	FEE	NAME OF CLASS	DATES/TIMES	INSTRUCTOR

Total Amount Enclosed $ _____ Circle Appropriate Credit Card: **Visa M/C Discover American Express**

Credit Card No. _____ Security Code _____ Exp. Date_____

Print Name *(as it appears on your card)* _____

Authorizing Signature _____

Credit Card Street Address (number only) and Zip_____

ALLAN HANCOCK COLLEGE
Start here. Go anywhere.
Community Education
922-6966 ext. 3209

College for Kids – Parent/Guardian Guidelines Form

Parent must take this form to the instructor at the first class meeting.

Student's name – Please print legibly _____
Last Name First Name

Contact telephone number while student is in class (_____)_____

Alternate telephone number while student is in class (_____)_____

Known allergies or other necessary medical information _____

_____

I have reviewed and understand the attached parent/guardian guidelines.

_____
Parent/Guardian Name (Print) Parent/Guardian Signature Date

ACKNOWLEDGMENT AND ASSUMPTION OF POTENTIAL RISK

Use with all athletics/sports, physical education activity courses recreation, field trips and high-risk classes, i.e., athletics, public safety, performing arts, labs, dance.

_____ wishes to participate in the Allan Hancock Joint
(PRINTED NAME)

Community College District sponsored activity(ies) of

Instructor/Advisor _____ Course #/Activity _____

Course/Club Name _____

I understand and acknowledge that these activities, by their very nature, may pose a potential risk of serious injury/illness to individuals who participate. I understand and acknowledge that some of the injuries/ illnesses that may result from participating in these activities include, but are not limited to, the following:

1. sprains/strains;
2. fractured bones;
3. unconsciousness;
4. head/neck/back injuries;
5. paralysis;
6. loss of eyesight;
7. death;
8. communicable diseases
9. or other serious injury

I understand and acknowledge that in order to participate in these activities; I agree to assume liability and responsibility for any and all potential risks that may be associated with participation in such activities.

I understand, acknowledge, and agree that the District, its employees, officers, agent, or volunteers, shall not be liable for any injury/illness suffered by me as a result of my actions that is incidental to and/or associated with preparing for and/or participating in the activity(ies).

Unless otherwise advised, I understand that I am responsible for my own transportation to and from the activity(ies) and the college assumes no liability for loss or injury resulting from my transportation and any passengers who I might transport, and any person driving a personal vehicle is not an agent of the District. Although the college may assist in coordinating the transportation, any assistance and/or recommendations provided is for informational purposes and is not mandatory. I understand that I am responsible for arranging for my own transportation.

Per Education Code § 87706, when the district does not provide transportation to and from the school premises to attend a school-sponsored activity off of the school premises, the district, its officers, and employees shall not be held liable for the conduct or safety of any student at any time when the student is not on school property.

If the college is providing transportation but I do not use the transportation, I am responsible to make my own transportation arrangements, and the college assumes no responsibility or liability of any kind.

I have no known medical condition that may pose a health and/or safety risk to me or others by participating in the activity (ies).

I hereby release, waive, discharge, indemnify and hold harmless the Allan Hancock Joint Community College District, its officers, employees, board members and agents from all liability from any loss, damage, accident, injury, or death related in any way to this field trip, excursion or other off-campus curriculum-related activity.

I acknowledge that I have carefully read this ACKNOWLEDGMENT AND ASSUMPTION OF POTENTIAL RISK form and that I understand and agree to its terms.

Student Signature	Date
Parent's Signature (if minor)	Date

<u>IMPORTANT NOTE</u>: Before a student will be allowed to participate in the above activity(ies), a signed Acknowledgment and Assumption of Potential Risk form must be on file each semester and retained within the department for 14 months from the end of activity per the statute of limitation (Gov. Code Sec. 911.2).