



The Open Door Program
Orange Community Education & Recreation
32000 Chagrin Boulevard
Pepper Pike, Ohio 44124
216-831-8605 / opendoor@orangecsd.org
www.orangerec.com



Dear Parents,

Welcome to the 2017-2018 School Year. The Open Door program operates year-round, providing quality programming before and after school and before and after camp programs of Orange Community Education & Recreation. We open at 7am and close at 6pm.

Open Door focuses on developing your child's skills for healthy growth through stimulating curriculum that includes crafts, music, arts, sports and various recreational and educational activities. The members of the Open Door staff come from a variety of educational backgrounds. In addition to your children's favorites, our Open Door team has many new and exciting activities planned for your children this year. Be sure to check our website www.orangerec.com for special days and events. For complete policies and procedures see your parent handbook online at www.orangerec.com.

To register your child (children) for the Open Door Program, please fill out the attached registration packet. Parents are responsible for notifying Moreland Hills School of their child's regular Open Door attendance schedule. **A note indicating your child's schedule must be on file in the Moreland Hills school office.**

If you have any questions, please feel free to call us at (216) 831-8605. If there is anything we can do to assist you, please do not hesitate to ask.

Sincerely yours,

Debbie Zimmerman
Open Door Supervisor

Kaitlyn Newman
Youth Associate

Open Door Tuition, Policies, and Procedures - 2017/2018

Registration Fees: Fees are per child and non-refundable:
 First Time Registration Fee: \$50
 Renewal Registration (THROUGH July 28th): \$25
 Renewal Registration (AFTER July 28th): \$35

Attendance Options: The most convenient and popular option for families is to register for the Open Door program on a regularly scheduled basis using the same days each week for the year. Please note that Full Days & Early Dismissals are NOT included in the monthly payments – you must register and pay for these separately. For occasional users or those monthly families that need to add a day, you must call to see if space is available. We will do our best to accommodate you.

Payment Schedule: Regardless of the attendance option, fees are due by the 20th of the month **preceding** Open Door service. Please pay by check, money order, exact cash or credit card (MC, Visa or Discover). Our office does NOT send bills or invoices; a \$25 fee may be incurred for this. **Late payments may result in your child being suspended from the program until the account is paid in full.**

Notification: Due to staffing ratios that need to be maintained, schedule changes must be requested in advance. The schedule change will be made based on availability of space and will not take place without the approval of the Open Door Supervisor. **You must notify the office at Moreland Hills School of the change.**

Late Fee: There will be a \$1.00 per minute late fee for arrival after 6 pm. This fee will be charged to your credit card that we have on file. Your child may be suspended from the program after 3 late arrivals. If you are consistently late, Open Door will be unable to retain your child in the program.

Program Option	Grade	Monthly Payment (9 payments of)				Daily Rate
		1 day/wk	2 day/wk	3 day/wk	4/5 day/wk	
YELLOW DOOR 7:00 am to the start of school	K to 5	\$35	\$70	\$105	\$135	\$10.00
GREEN DOOR After school to 6:00 pm	K to 5	\$55	\$110	\$165	\$210	\$15.00
EARLY DISMISSALS After school to 6:00 pm	K to 5	-	-	-	-	\$25.00
FULL DAYS 7:00 am to 6:00 pm	K to 5	-	-	-	-	Fee Varies

- ❖ Registration packets and payment must be turned in by August 4th to start the school year.
- ❖ Please note that Full Days & Early Dismissals are NOT included in the monthly payments.

****Ohio's return-to-play law goes into effect on April 26th, 2013****

Ohio's Return-to-Play Law: What a Parent/Guardian Needs to Know – Youth Sports Organizations



For athletes participating in youth sports organizations (non-school sports):

1. Starting April 26th, 2013, parents and athletes are required to receive a concussion information sheet annually for each sport.
2. Coaches, referees, or officials must **remove an athlete from play** if the athlete is exhibiting the signs and symptoms of a concussion during practice or a game. These include:
 - Appears dazed or stunned.
 - Is confused about assignment or position.
 - Forgets plays.
 - Is unsure of game, score or opponent.
 - Moves clumsily.
 - Answers questions slowly.
 - Loses consciousness (even briefly).
 - Shows behavior or personality changes (irritability, sadness, nervousness, feeling more emotional).
 - Can't recall events before or after hit or fall.
 - Any headache or "pressure" in head. (How badly it hurts does not matter.)
 - Nausea or vomiting.
 - Balance problems or dizziness.
 - Double or blurry vision.
 - Sensitivity to light and/or noise
 - Feeling sluggish, hazy, foggy or groggy.
 - Concentration or memory problems.
 - Confusion
 - Does not "feel right."
 - Trouble falling asleep.
 - Sleeping more or less than usual.
3. The athlete **cannot** return to play on the same day that the player is removed.
4. The athlete **is not permitted** to return to play until they have been assessed and receive written clearance by a physician (MD or DO) or by any other licensed health care provider approved by the youth sports organization.

PLEASE NOTE: It is important to review your organization's policy regarding which health care providers are authorized to clear an athlete to return to play.

For More Information

Ohio Department of Health - Ohio's Return to Play Law: www.healthyohioprogram.org/concussion

Centers for Disease Control and Prevention - Heads Up in Youth Sports:
www.cdc.gov/concussion/HeadsUp/youth.html

Centers for Disease Control and Prevention – Returning to School after a Concussion:
www.cdc.gov/concussion/HeadsUp/schools.html

Ohio Department of Health
Concussion Information Sheet
for Participants in Youth Sports & Sports-Related Programs

Acknowledgement of Receipt
of Ohio Department of Health's
CONCUSSION & HEAD INJURY INFORMATION SHEET

By signing this form, as the parent, guardian or care-taker of a child participating in youth sports or sports-related programs offered by Orange Community Education & Recreation, I acknowledge receiving a copy of the Concussion & Head Injury Information Sheet for Youth Sports Organization participants prepared by the Ohio Department of Health as required in section 3313.539 of the Ohio Revised Code.

I understand concussions and other head injuries can have serious and possibly long-lasting effects. By reading the attached Concussion Information Sheet, I understand I have a responsibility to report any signs or symptoms of a concussion or head injury to coaches, program leaders and my child's doctor.

I also understand that coaches, referees and other sports officials have a responsibility to protect the health of youth sports participants and may prohibit my child from further participation in youth sports and sports-related programs until my child has been cleared to return to play by a physician or other appropriate health care professional.

- Ohio Department of Health's Concussion & Head Injury Information Sheet attached.

Child's Name _____
(Please print)

Parent/Guardian Signature _____

Today's Date _____

This form must be signed and returned to Orange Community Education & Recreation prior to your child participating in youth sports and sports related programs.

Orange Community Education & Recreation*32000 Chagrin Blvd.*Pepper Pike, OH 44124* 216-831-8601

Open Door 2017/2018 Registration K – 5th Grade

CHILD NAME _____ Grade _____ Teacher _____
(If known)

Home Address _____
Street City Zip

Date of Birth _____ Age _____ Sex M F P.M. bus# _____
(If known)

Home E-Mail Address _____
 Home Phone () _____ Fax Number () _____

Mother/Guardian Name _____		Occupation _____	
Address _____			
<small>Street</small>		<small>City Zip</small>	
Home Phone () _____		Work Phone () _____	
Cell Phone () _____		E-Mail _____	

Father/Guardian Name _____		Occupation _____	
Address _____			
<small>Street</small>		<small>City Zip</small>	
Home Phone() _____		Work Phone() _____	
Cell Phone () _____		E-Mail _____	

Please Indicate order to call: ___ Home ___ Mom Work ___ Dad Work ___ Mom or Dad Cell

HEALTH

Any chronic health issues? _____

Any allergies? _____

Any food not to be offered? _____

Any serious operations or hospitalizations? _____

Any difficulty hearing, speech or vision? _____

Takes any medication or supplements? ___ If so, what? _____

Any special needs Open Door staff should be aware of? _____

<u>Child Care Schedule:</u> Please circle the days your child will be attending the program.						
First Day of Attendance: _____						
€ I am going to be using the Monthly Plan						
€ I am going to be using the Daily option and will check availability & submit payment prior to attendance						
AM	K – 5 th	Yellow Door	Mon	Tues	Wed	Thurs Fri
PM	K – 5 th	Green Door	Mon	Tues	Wed	Thurs Fri

A note indicating your child's Open Door schedule must be on file in the Moreland Hills school office before the first day of attendance

EMERGENCY INFORMATION

Purpose: To enable parents and guardians to authorize the provision of emergency treatment for children who become ill or injured. The information requested is especially important if you cannot be reached or if you are out of town.

STUDENT NAME _____	
LAST	FIRST

Persons authorized to pick up my child or to act on my behalf:

1. Name _____	Phone(____) _____	Relationship _____
2. Name _____	Phone(____) _____	Relationship _____
3. Name _____	Phone(____) _____	Relationship _____

Are there any persons who *may not* pick up your child? _____

Are there any special custody or visitation arrangements of which we should be aware? _____

**If so, please provide written documentation.*

List of medications that you will be providing us for your child's health conditions (Medicine Administration Form will need to be filled out):

FAMILY HISTORY

Are both parents involved in the child's life? _____

Has anyone other than the parent(s) had a significant role in the child's life? _____

Any language other than English spoken at home? _____

Person(s) primarily responsible for disciplinary action? _____

When angry or upset, the child responds best to _____

Provide any other information that might help the staff (likes, dislikes) _____

TO GRANT CONSENT

In the event reasonable attempts to contact me have been unsuccessful, I Hereby give my consent for (1) the transfer of the child to any hospital reasonably accessible and (2) the administration of any treatment deemed necessary by a licensed physician or dentist. This authorization does not cover major surgery unless the medical opinion of two other licensed physicians or dentists, concurring in the necessity for such surgery, are obtained prior to the performance of such surgery.

Signature of Parent/Guardian **Date**

INSURANCE

(Name of Carrier)

This department ***DOES NOT*** provide insurance for participants. You must have insurance coverage for your child before they can attend the program.

The Open Door Program Waivers and Authorizations

(Initial next to each statement)

Discipline Policy

_____(Initial) I have received, read, and discussed the discipline policy with my child. I understand that my child will be suspended for 2 days (or more) if 3 incident reports are accumulated. My child may be asked to leave immediately for severe infractions.

Waiver of Participation

_____(Initial) We, the undersigned, do hereby consent to our registrant's participation in the Open Door Program. Registrant is in good health and can participate in all activities. Therefore, in consideration of services to be performed by Orange Community Education & Recreation, I/we do further release its agents and employees from any and all claim or liability to us for any damages or injuries, which may be sustained by, said registrant in connection therewith.

Waiver of Confidentiality

_____(Initial) I hereby authorize the professional staff of the Orange School District to disclose pertinent information concerning the overall welfare of my child, _____ to Open Door or Orange Community Education & Recreation. The Open Door staff (to insure a consistent and integrated program while your child is in Open Door's care) may use this information to aid in programming for my child. I have the right to discuss and inspect the information, which might be exchanged.

Transportation Permission

_____(Initial) I hereby give Open Door permission to transport my child in and around school grounds for mini-trips, hikes, and outings to and from the school buildings, swimming pool, and the Pepper Pike Learning Center. These outings may be by foot or bus. I hereby release the Orange School District and Orange Community Education & Recreation Department, its employees, volunteers, and officials from any liabilities due to injuries that may be sustained during the transportation and/or outing.

Late Fee Policy

_____(Initial) I understand that there is a \$1.00 per minute late fee for arrival after 6pm. This fee is due upon pick up. If your child is picked up late 3 or more times, he or she will be withdrawn from the Open Door program for the session with no refund.

Signature _____

Date _____



OPEN DOOR DISCIPLINE POLICY

Dear Parents,

In an effort to promote appropriate behavior among all of our school-age children, the Open Door Program has a discipline policy. We are stressing proper behavior in the following areas:

1. Respect for belongings and property (Personal, School, and Others)
2. Respect for teachers and other children
3. We use words instead of action to express our feelings
4. We encourage positive communications for resolutions
5. We encourage healthy social interaction, with sensitivity and care for our friends.

Infrequent abuse of these rules will be dealt with by removing the child from the situation. Should a child seriously violate any of these conduct principles, a Discipline/Incident report will be filled out and reviewed with the parent, student and staff member. This report needs to be signed by the parent and staff. After 3 incident reports have been filled out, **the student will be suspended from the program for 2 days or more.** The staff has been instructed to file reports only for *serious and repetitive* behavior problems.

Open Door has the right to ask a family/child to leave the program if the child acts in such a way as to hurt others while enrolled in this program. This also applies if a child fails to consistently follow these policies. Children dismissed from the Open Door program could be excluded from all OCE&R programs for the session.

Thank you,
The Open Door Staff

2017-18 Open Door



AUGUST 2017

S	M	T	W	T	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

7-11 After Adventure Camp Only
 14-17 Back to School Specials
 18 Convocation Day - CLOSED
 21 1 - 5 First Day
 26 Fall Registration Fair
 24 & 25 Kindergarten Phase In
 28 Kindergarten First Day

SEPTEMBER 2017

S	M	T	W	T	F	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

4 Labor day - all closed
 8 Delayed Start 3-5 grade
 15 Delayed Start K - 2 grade
 20 Rosh Hashanah - closed @ 6pm
 21 Rosh Hashanah - all closed
 22 Schoolz Out Special
 29 Yom Kippur - closed 6pm

OCTOBER 2017

S	M	T	W	T	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

13 NEOEA Day - School Closed
 Schoolz Out Special
 20 Trunk or Treat

NOVEMBER 2017

S	M	T	W	T	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30		

6 Records Day -
 Schoolz Out Special
 16 Early Dismissal
 17 School Closed -
 Schoolz Out Special
 22-26 CLOSED

DECEMBER 2017

S	M	T	W	T	F	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

25 - Jan 5 - Winter Break - No School
 25-26 CLOSED
 27,28,29 Schoolz Out Specials
 31 - New Years Eve

JANUARY 2018

S	M	T	W	T	F	S
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

1,2 -CLOSED Happy New Year!
 3,4,5 Schoolz Out Specials
 8 School Resumes
 15 - CLOSED MLK Jr Day

FEBRUARY 2018

S	M	T	W	T	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28			

19 CLOSED - Presidents' Day

MARCH 2018

S	M	T	W	T	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

16 Early Dismissal
 26-29 Spring Break Special
 30 Good Friday - CLOSED

APRIL 2018

S	M	T	W	T	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					

2 CLOSED

MAY 2018

S	M	T	W	T	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

28 CLOSED - Memorial Day

JUNE 2018

S	M	T	W	T	F	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

5 Early Dismissal
 Last Day for Students
 8 CLOSED
 11 Summer Programs Begin

July 2012 - for planning

S	M	T	W	T	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

