As we want all of our programs to be a place of safety, respect, and fun for <u>ALL</u> members please read over the following. <u>BOTH</u> you and your child (relative to your child's cognitive level) are signing that you have read and understood them and will abide by them.

Please explain the statements to them and also have them sign. Your child is signing that they have had the expectations explained and that they will do their best to abide by them to make this a safe and productive learning environment. We recognize that they cannot give true consent as they are minors and under your guardianship, but do want ownership to begin to occur for their actions and choices.

Please sign and date that all information you have provided is correct to the best of your knowledge and that you have read the informational packet that covers what each program is about:

Please sign and date that it is okay to release your child's picture and age/grade, and your contact information. They cannot be in the program if we cannot have this information. This information is provided to the other members of the program in case any of the members want to set up activities outside the program and also to give a reference for who is in the program.

Please sign and date that it is okay to videotape your child. They cannot be in the program without this being consented to. This is used as an additional learning tool for all members and staff. The full footage that we accumulate is for staff review purposes only and is destroyed at the end of the session.

Please sign and date that you understand our site is also a teaching site for various university volunteers such as undergraduate and graduate level students. As a teaching site we often request that those interested in volunteering observe first at our site before choosing us so that we can select the best personnel for interaction with your child. As a teaching site this also means that they may be writing reflections or papers about their experiences here. However, all information is kept confidential and they are not allowed to state names in their class or supervision sessions. Your child cannot be in our program if you are not comfortable with this aspect of our agency.

Consent Form Page 1

Please sign that you understand that participation in this program means that your child will abide by all United Through HOPE program policies/rules. If after attempts have been made to work through "challenges" and/or non compliance with the rules/policies, then the staff of United Through H.O.P.E., Inc., has the right to ask an individual not to return to the program.

Please sign that you understand that the purpose of our Programs is to help individuals have fun socially & experience social success. Please sign that you understand that there are several possibilities (consequences) that could occur when someone makes a mistake that is hurtful and/or dangerous and/or compromise the safety of themselves or others in the program (no particular order to which may be assigned or when).

- They could be issued a warning and be asked to find a way to "fix the issue."
- An individual can be placed on "probation" until they complete the next event and fix the mistakes they have made.
- An individual can be suspended from next event.
- An individual can be removed from the program for the remainder of the program

Please sign that you understand that aggressive behavior (verbal or physical) can be harmful to the program and its members and that no aggressive behavior will be tolerated.

Please sign that you understand that at the events your child has been asked not to text, make phone calls, go off by themselves, or leave anyone alone or be left alone without speaking to a staff member first.

Please sign that you understand that participating in disrespectful conversations or acts through any form of medium, including but not limited to any form of social media, including text messaging and emails will not be tolerated. This applies to parents also.

Consent Form Page 2

☆

 \bigstar

☆

☆

 $\frac{1}{2}$

Please sign that you understand that it is required to let the staff members know PRIOR to the event when your child will be absent from an event. It helps the staff plan accordingly, but is also respectful to the staff, our agency, and the other members.

Please sign that you understand that your child's commitment is for all events once enrolled. You may choose to stop attending at any time AND a refund will not be issued for any sessions you choose not to attend, and you will be expected to pay the full amount owed for that program.

Please sign that you understand that you understand that a pro-rated fee is only relevant to those members who START late and only applied to certain programs. Their enrollment fee is adjusted for the missed session (ex: if program started on 9/1 but they did intake after that and started on 9/20 they are pro-rated for a payment that starts on 9/20).

Please sign that you understand that for any of the group based programs if your child misses a session once they start there is no pro-rated amount for that as the fees are calculated as group fee, and therefore are already reduced because it is a group.

For those who choose the special topics, stand alone meetups, Centauri (or any other program that is a one time offered event and had a deadline associated with it) you will still be responsible for the payment. By signing below please you understand that if you choose to withdraw your child from an event after the deadline stated (you may withdraw up to a week before the event would occur,-for example if event is on Sunday, May 19 you have until one week before which would be Sunday, May 12 to alert us that you withdraw). Withdrawing after the deadline has passed or NO SHOWING for an event will require the payment for that event to still be made. The full amount including transportation costs will still be expected to be paid.

Consent Form Page 3

\bigstar		***************	☆
☆			
*			*
☆ ☆			አ ~
<u>∽</u> –			
$\stackrel{\sim}{\bigstar}$	Parent	Date	☆
☆			☆
☆ _			*
☆ _	Student	Date	*
☆ ☆			፲ ፈ
☆			
☆			☆
☆			☆
*			*
☆			*
☆ ☆			X A
☆ ☆			
$\stackrel{\sim}{}$			☆
☆			☆
☆			*
☆			*
☆ ☆			☆
☆			X A
☆			~ ☆
☆			, ☆
☆			☆
*			*
☆			☆
☆ ☆			X A
☆			
☆			☆
☆			☆
☆			*
☆			*
☆ ☆			X A
$\scriptstyle \scriptstyle $			
$\stackrel{\sim}{}$			☆
☆			☆
*			*
☆			***
☆			☆
☆			X A
$\stackrel{\sim}{\star}$			~ ☆
☆			☆
☆			☆
*			*
☆			*
☆		Consent Form Page 4	☆
☆ ☆		Consent Form Fage 4	X ~
☆			
\bigstar			☆
	$\sim \sim $	*****	$\land \land \land$