

Knight Riders

This program is designed to get your young adults active this summer on their bike and in their community! Participants will need a working bike and helmet for their travels in North Liberty and Coralville area. Mornings are spent with games, crafts, projects and riding. Afternoons will be spent swimming, games, outdoor activities and field trips. We will try and do at least one large community service project each week along with smaller projects within the city. We look to help with our community summer lunch program as well.

This program is designed for the participants to be active parts of the program planning process and to develop activities that excite and motivate them. This is a great way to give something back to your community, meet new friends, and have fun this summer! The program is open for students entering 6th grade through 9th grade. The Rec Center will be the home base for the Knight Riders but be prepared to ride 5-10 miles per day.

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Week 1—June 12-15

Week 2—June 19-22

Week 3—June 26-29

Week 4—July 3-6 (no 4th)

Week 5—July 10-13

Week 6—July 17-20

Week 7—July 24-27

Week 8—July 31– Aug 3

Week 9—Aug 7-10

Field Trip on Tuesdays!

Movie at Coral Ridge

Adventureland

Air FX

Ice Skating/Mall (Monday)

Spare Me Bowl & Arcade

CR Kernels (Wednesday)

Fun City Burlington

Lost Island Waterpark

Alpine Slide @Chestnut Mountain

Program held Monday—Thursday; 8:30-4:30

Weeks 2, 7, 8, 9 Field Trips days will last until 5:30.

Fee: \$160 per week

Must be entering 6th grade through entering 9th grade.

Enrollment - 3/1 past enrollees; 4/1 Open to public

Community service learning projects & learning self-development

Ronald McDonald House
Clean up of Iowa Athletic Facilities
IA Children's Museum
Trial Clean Up
Wash Police Cars
Animal Shelter
K9 Unit
Fire department
Learning about local business

Parents of Children with Special needs or needing special arrangements such as medication or behavior problems should make arrangements to meet with the program supervisors a minimum of 2 weeks prior to your child's start date.

<u>Financial Assistance</u>: Ask front desk or Program supervisor about funding options with HACAP eligibility.

<u>Cancellation fees</u>: You are allowed to transfer weeks, as long as there are opening with no penalty.

What Parents Need To Know

Home Base: Knight Riders will meet in a conference room downstairs of the Rec Center.

<u>Storing Bikes</u>: Sorry, we will not be storing bikes at the Rec Center. There is a bike rack that the participant can lock their bike up to if you decide you would like to leave the bike there for the week. (WE are not responsible for any stolen or vandalized bikes)

Weekly Agenda's: Each week you will receive the Knight Riders agenda's by email. An email distribution list will be set up and will be sent blind carbon copy to all families.

<u>Riding Home:</u> Participants may ride their bikes home at the end of the day with permission by parents. Please fill out the form at the back of this packet and bring to Knight Riders the first day your child starts.

Field Trips will be on Tuesdays

What to Bring Everyday

<u>Backpack:</u> All Participants will need to have a back pack to put all of their personal belongings in.

<u>Lunch</u>: Lunches are not refrigerated so pack accordingly.

Water Bottle: Keeps you hydrated throughout the day

<u>Label</u>: Please label all personal items such as water bottle, towels, sunscreen, electronics, etc...

Swimming: Bring suit to change into even if you are not swimming so you don't get your clothes wet.

<u>Extra Clothes:</u> Some of the learning service projects will be messy and dirty. Please pack accordingly to the week's agenda.

Shoes: Closed toed shoes are required. Open toed sandals or flip flops are not allowed.

<u>Sunscreen</u>: A majority of our time is spent outside please make sure your child brings sunscreen every day.

<u>Padlock</u>: With all of the traveling done in the North Liberty/ Coralville area it is highly suggested to get a padlock to lock up your bike.

Money: It is up to your own discretion. There may be days were participants can stop and pick up a snack or drink at a convenience store or on Field trip days.

Movies: We will occasionally watch or go to movies with Knight Riders. Movies will be G, PG, PG13 rated.

Disciplinary Guidelines

First offense will be a verbal warning and a discussion with the participant. The second offense will result in notification to Parents/ Guardians by Staff member. If the problem is sever in nature, such as a physical incident, participant will be suspended or expelled. There is no pro-ration of fees for suspension or dismissal during that week. Any remaining weeks will be refunded if the child is dismissed for the summer.

Knight Riders Registration Info.

Child's Name:	Age	Birthdate	Sex: M F		
Address:					
Address: Street	City	State	Zip code		
Home Phone:	School Attending:	Gra	nde (Going into)		
PAREN	TS/GUARDIANS WITH	WHOM THE CHILD	RESIDES:		
Name:	N	ame:			
Relationship:	Relationship:				
Employer:	Employer:				
Work hours:	Work hours:				
Business phone:	Business phone:				
Cell phone:	Cell phone:				
	E	maii:			
City/State/ZIP:	C	ity/State/ZIP:			
each trip.	ature of Parent/Guardian		nd/or posted message before Date		
_	WAVIER FOR PAR	RTICIPANT BY PARE	ENT		
Knight Riders Program, he release any and all rights at reation commission, City C tors for any and all injuries The North Liberty I while attending our programentering. I understand that the	accepting my child's entry erby, for myself, my child, and claims for damages I, or council, and its successors a suffered by myself or my concept and department will m. I further understand the erules of Knight Riders Programs.	into the North Liberty my heirs, executor and my child may have ag and assign, its employe child at an activity spor- not be responsible for risks inherent to the ac-	Recreation Departments' administrators, waive and ainst the North Liberty Recres, agents, officers and directorsored by these groups.		
Signature:		Da	nte:		

Child's Name:		Birthdate:	r
Child's Doctor:	Phone:	Address:	
Child's Dentist:	Phone:	Address:	
lowa City Hospital Preferred:			
Date of Last Tetanus:	Are all immur	nizations current?: Yes No (Please specify)	
Allergies:/plages include both drug food	or neet)		
Present Medication:			
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A medication release form must be comple		fibuted at 1 Knight Riders Program, Including over the counter	items
			itaria.
	¥	_Policy Holder's I.D.:	
Please list significant illnesses and sur	jeries child nas nad	(give age at time).	
	Attach additional shee	do consider	
Does your child have any physical condition his/her activity? Please explain condition	dition or disability, w	hich our staff should be aware of? Would this re	estrict
Is this child subject to any condition, where the subject to any condition is the subject to any condition.	nich limits classroon	n or physical activities?	ψ.
Is this child subject to any mental or phyobservation? For behavior conditions,		which he/she should remain under periodic med bach used at home/school to correct:	ical
Other information you would like to sha	re:		
ADMISSION FOR TREATMENT. EVERY EFFOI EMERGENCY, ILLNESS, OR INJURY. IN THE E	RT WILL BE MADE TO EVENT THAT THE PARE	ITAL/GUARDIAN ABSENCE AND MUST BE PRESENTED NOTIFY THE PARENT/GUARDIAN IMMEDIATELY IN CA ENT CANNOT BE CONTACTED OR ARRIVE AT MBULANCE IN AN EMERGENCY SITUATION.	RE OF
IN THE EVENT THAT MY CHILD REQUIRES MEDI HEARBY GIVE CONSENT TO MEDICAL OR SURG	GICAL TREATMENT TO T SENCY CARE AND/OR TRI	E WHILE! AM OUT OF THE CITY OR UNABLE TO BE REAC THE ABOVE HOSPITAL AND/OR DOCTOR. I AGREE TO PA EATMENT FOR MY CHILD AS SECURED OR AUTHORIZED I TO AUGUST 31, 2016.	AY ALL
SIGNATURE OF PARENT/GUARDIAN	*	SIGNATURE OF PARENT/GUARDIAN	
DATE:	W	DATE:	

Knight Riders

Exception to Arrival/Departure Procedures Form

This for is for exceptions to the arrival/departure procedure for Knight Riders

This form needs to be completed will be leaving at a regularly, sch	I if your child will be biking to Knight Riders, or he/she eduled time each day.
	has permission to arrive at or leave Knight Riders on
CHILDS NAME	
	at
Week of / Date(s)	Time
То	 _
Destination	

I understand the North Liberty Recreation Department will not be responsible before my child arrives to the program or after my child leaves the program as authorized above.