

2018 MULTICULTURAL ARTS & TECHNOLOGY SATURDAY PROGRAM @ Tunxis Community College

AFRICAN DRUMMING, ART, DANCE, CHINESE PERFORMING ARTS, TECHNOLOGY and WRITING

Dear Parent/Guardian:

Your child is invited to attend the **2018 Multicultural Arts & Technology Saturday Program** at Tunxis Community College. Enclosed are the registration forms for students entering grades 2 - 6 from the Farmington Valley communities.

**November 3, 10, 17, December 1, 8, 15
8:30 AM - 12:30 PM at Tunxis Community College**

Program specifics:

- Visit the Mark Twain Museum or New Britain Museum of American Art (11/17)
- Visual, performing arts, technology and creative writing activities are taught by certified teachers, professional artists and performers in collaboration with Tunxis Community College.
- Parents are invited to share in their child's experience on 12/15 from 11:30 AM to 12:30 PM at Tunxis Community College.
- Registration Fee - \$25.00
- Enrollment is limited to available space

Student Responsibilities:

- Participate fully and responsibly in **ALL** 6 sessions.
- Adhere to all school regulations in effect during the program and during transportation to/from program locations.
- Bring a creative/inquisitive spirit.
- Students should bring a healthy snack and drink (no glass bottles). **Snack should NOT contain peanut products.**

QUESTIONS?

Contact **Dr. Augustine Cofrancesco**, Multicultural Arts & Technology Program Manager for the Farmington Public Schools, at (860) 965-9741, drco@inbox.com, drcoart@gmail.com

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REGISTRATION

(make a copy for your records)

TRANSPORTATION INFORMATION

Parents must provide adult supervision at sites both before and after sessions. Please **CHECK** the location that you wish your child to be picked up and dropped off or if a Parent/Guardian will drop off and pick up (*you cannot combine locations*):

____ Rawson School, Hartford, Bus pick up 8:00am; Return 12:50pm

____ Vance School, New Britain, Bus pick up 8:05am; Return 12:45pm

____ Linden School, Plainville, Bus pick up 8:10am; Return 12:45pm

____ Parent/Guardian drop off @ Tunxis 8:30am; pick up 12:30pm (*enter parking lot from Rt. 177, drop off at circle with the flagpole, Building 100*)

CONTACT INFORMATION

Student Name: _____ Age: _____ Grade (fall 2018): _____

Street: _____ City: _____ State: _____ Zip: _____

School Child Attends: _____ Gender: M F Race: _____

Parent/Guardian Name: _____ Email: _____

Home Phone: _____ Cell Phone: _____

Emergency Contact: _____ Relationship: _____

Home Phone: _____ Cell Phone: _____

HEALTH INFORMATION

*In case of accident or serious illness, you will be contacted and your child will receive emergency treatment at a local hospital. **We do NOT have a nurse on duty, therefore, we do not administer any medications. Administration of all medications must be arranged by parents.***

Does your child, have any limiting disabilities or identified as having special needs? Yes No

Classification: _____

Is your child currently taking any medications (prescribed or otherwise)? Yes No

If yes, please provide medication information:

Name: _____ Dosage: _____ Time of Day: _____

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Does your child have any allergies, reactions to medications or dietary needs? Yes No

If yes, identify and explain: _____

Is your child allergic to bees? Yes No

If yes, does your child bring epi-pen or medication? Yes No

Physician's Name: _____ Phone Number: _____

List the name of a neighbor or relative (18 and older) who will assume temporary care of your child if you cannot be reached:

Name: _____ Phone Number: _____

Street: _____ City: _____ State: _____ Zip: _____

PHOTOGRAPHY PERMISSION

I **Do** / **Do Not** (*circle one*) give permission for my child to be photographed by the Multicultural staff for program use, and or the news media to advertize the program.

FIELD TRIP PERMISSION

My child, _____, (*child's name*) has my permission to participate in the Multicultural Arts Saturday Program including all field trips. I hereby release and discharge Farmington Public Schools, its agents, employees and officers, from all claims, demands, actions judgments, and executions which the undersigned ever had, or now has, or may have against the Farmington Public Schools, its successors or arising out of, participation in the above named program. I, the undersigned, have read this release and understand all its items. I execute it voluntarily with full knowledge of its significance.

Parent/Guardian Signature: _____ Date: _____

COMPLETE THE REGISTRATION FORMS AND RETURN, ALONG WITH THE COURSE FEE, TO:

Farmington Continuing Education
1 Depot Place
Unionville, CT 06085
(860) 404-0290

- **Registration forms received without the course fee will not be processed.**
- **A confirmation email will be sent to confirm your child's registration!**