

Registration Packet

2016 MULTICULTURAL ARTS SUMMER PROGRAM

FARMINGTON HARTFORD NEW BRITAIN PLAINVILLE

Dear Parent/Guardian:

Enclosed are the registration forms for pupils grades 2-12 who would like to enroll in the 2016 Multicultural Arts Summer Program. Dates are July 7-27, a total of 15 sessions (MTWThF). Classes are 8:45 a.m. to 12:30 p.m. at Farmington High School, 10 Monteith Drive, Farmington, CT. Students will be bused to this location from selected sites. Parents are invited to share their child's experience on Wednesday, July 27, 11:00 – 12:15 p.m. at Farmington High School.

This program will give students the opportunity to:

- Visit the Hill-Stead Museum and New Britain Museum of American Art
- Create artwork through drawing, painting, media technology & mural production
- Participate in, African drumming, steel pan, Chinese instrumental music, dance, puppetry & theater
- Experience the arts of diverse cultures through presentations by visual & performing artists
- Improve writing & thinking skills through arts related activities
- Teens may apply for mentoring opportunities at program sites including Camp Courant

Attached you will find important parent information and a registration packet to be completed and returned with a **registration fee of \$55.00, made payable to Multicultural Arts, by June 20, 2016** in order to secure a place for your child in the program (**Fee may be waved based on financial need**). **Return completed forms and registration fee to the contact person representing your district (registration fee is non-refundable):**

Farmington

Jody Gottier, 860 673-2514
Farmington High School
10 Monteith Drive
Farmington, CT 06032
Email: gottierj@fpsct.org

New Britain

Jayne DePole-Bogucki, 860 225-8731
Vance Village School
183 Vance Street
New Britain, CT 06052
860 225-8731, depole@csdnb.org

Plainville

Linda Helming, 860 793-329
Wheeler Elementary School
15 Cleveland Memorial Drive
Plainville, CT 06032
helmingl@plainvilleschools.org

Hartford

Glenn Mauldin
Wilson-Gray YMCA
444 Albany Ave.
Hartford, CT 06120
860 241-9622, ext. 104
glenn.mauldin@ghymca.org

Lynn Roach
Classical Magnet School
85 Woodland Street
Hartford, CT 06105
860 695-9250
Roacl001@hartfordschools.org

(The Multicultural Arts Program is offered each year subject to CT State Dept. of Education funding)

Completed forms must be on file in order for your son/daughter to start the program. **There are no registration confirmations, so assume your child is enrolled in the program.** If for any reason your child cannot participate, please notify Jody Gottier (860 673-2514) immediately. If there is a question of financial

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need regarding the registration, it may be partly or completely waived by contacting the representative from your district listed on page 1.

We look forward to your child's participation in the Multicultural Arts Program. As research shows, participation in the arts can have a significant impact on a student's creative thinking and academic performance. If after reviewing this information you need further clarification, please feel free to call the contact person for your district or:

Dr. Augustine Cofrancesco, Multicultural Arts Program Director,
Farmington Public Schools, 860-965-9741, Email drco@inbox.com

PARENT INFORMATION

Parents should provide adult supervision at pick-up sites both before and after sessions.

Please note, on the registration form, if your child has any allergies or medical/health condition.

Attendance is **encouraged at all fifteen (15) sessions**. Activities **start promptly at 8:45 a.m., and end at 12:30 p.m.**

Student responsibilities:

- Participate fully and responsibly in all **fifteen (15) sessions**.
- Adhere to all school regulations, which are in effect during the program as well as during transportation to and from program sites.
- Bring a creative/inquisitive spirit.

In case of emergency call Dr. Augustine Cofrancesco at 860 965-9741 or Jody Gottier 860 673-2514. Food will not be included in the Multicultural Program, students should bring a healthy snack/drink (no glass bottles).

***Bus transportation:**

Your child will be picked up at the site listed below from Hartford, New Britain or Plainville and transported to and from Farmington High School. After the 12:30 dismissal, your child will be dropped off at the same location at the times listed below.

TOWN	PLACE	PICK-UP	DROP-OFF
Hartford	Breakthrough II	7:45am	1:15 pm
Hartford	YMCA	7:55 am	1:05 pm
Hartford	Classical Magnet	8:05 am	12:55 pm
New Britain	Vance Village	7:50 am	1: 05 pm
New Britain	Jefferson School	8:10 am	12:50 pm
Plainville	Wheeler School	8:00 am	12:55 pm

***Transportation is not provided in Farmington.**

Students will participate in two field trips. They will be transported from Farmington High School to and from the sites between 8:45 am and 12:30 pm e.g., **The Hill–Stead, and the New Britain Museum of American Art. In addition, Student mentors will participate in field trips to Camp Courant, Farmington.**

(Keep this schedule for your records)

REGISTRATION (Return this portion of the enrollment packet)

Program enrollment fee of \$55.00 must be paid in full with registration (unless waved by contacting the representative from your district). The fee is refundable **only** if your child is not accepted due to space limitations or if the program is canceled.

CONTACT & HEALTH INFORMATION

Student Name: _____ Age: _____ Grade(fall) _____
Street: _____ City: _____ State: _____ Zip: _____
School Child Attends: _____ Gender: _____ Race: _____
Parent/Guardian: _____ Phone:(H) _____ (W) _____
E-mail _____ Cell Phone _____
Emergency Contact: _____ Phone (H) _____ (W) _____

In case of accident or serious illness, you will be contacted and your child will receive emergency treatment at a local hospital.

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

_____ Special Ed. Classification: _____

Please explain: _____

Is your child currently taking any medications (prescribed or otherwise, e.g. cold medicine)? Yes No

Please List: _____

Milligrams per medication: _____

At what times during the day: _____

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 epee-pen or medication? Yes No

Note, we do not have a nurse on duty, and therefore, do not administer any medications.

Administration of all medications must be arranged by parents.

Immunization against measles

I certify that my child has received the required Immunization against measles .

Parent/Guardian signature: _____ **Date:** _____

* I am aware that neither this program nor Farmington, Hartford, New Britain, and Plainville Public Schools provide health insurance coverage of any type for participants. I realize that any medical bills incurred will be my responsibility. My son/daughter has permission to be treated at the nearest hospital.

Local physician's name _____ Tel. No. _____

List the name of a neighbor or relative who will assume temporary care of your child if you can't be reached.

Name _____ Tel.No. _____

Address _____

TRANSPORTATION: Hartford, New Britain and Plainville parents circle the location that you wish your child to be picked-up and dropped off.

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Plainville	Wheeler School	8:00 am	12:55 pm

_____ Check, if you will drive your child to and from Farmington High School 10 Monteith Drive, CT.

Parent Volunteers

Parents are invited to volunteer:

Yes I would like to volunteer during the program for special projects

Yes I would like to chaperone on field trips.

Name of Parent: _____

Phone #: _____ **W/H #:** _____ **Cell #:** _____

Name of Child: _____

**MULTICULTURAL ARTS SUMMER PROGRAM
Release from Liability Form**

Release made (date) _____ 2016, by _____
Parent/Guardian

City of _____, State of, _Connecticut_____

As a parent/guardian of _____, of _____
Name of child or ward City/State

Specify child's address if different

_____ (child/ward) has my permission to participate in the Multicultural Arts Summer Program including all field trips. I understand as part of the instructional program media technology is used to document student activities including performances for purposes of instruction, exhibitions or publications. I hereby release and discharge Farmington, Hartford, New Britain, and Plainville 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, Hartford, New Britain, and Plainville 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.

Signature of Parent/Guardian: _____