



Community House 2022-2023 Registration Form

Dear Parents/Guardians,

Founded in 1969, Community House is devoted to standing with Princeton families by providing tools for academic success and social-emotional wellness through programs that bolster early childhood literacy, promote the mastery of fundamental academic skills, provide mentoring and create early awareness of post-secondary opportunities for underserved youth.

For the 2022-23 academic year we are pleased to welcome youth who are fully vaccinated against COVID-19 back to our on-campus locations. For those who are not vaccinated, we will continue to offer programming virtually as well as in-person at off campus locations as possible.

*Please complete the enclosed application if you would like your child to participate in Community House programming for the current year. Completed applications can be returned to Community House via email, mail, or fax. **Please note, only youth participants who are fully vaccinated against COVID-19 and have received their booster shot will be able to participate in Community House programming taking place on the Princeton University Campus.***

Registration materials will be reviewed in the order they are received, with students being accepted to the program on a first come, first served basis. Notifications of acceptance will also include steps to verify the youth participants COVID-19 vaccine status if they have elected to participate in on campus programming.

If you would like to learn more about this exciting event for your child, please contact Community House at 609-258-6136 (phone), house@princeton.edu (email) or 609-258-9070 (fax).

Best,

Charlotte Collins

Charlotte E. Collins

Community House | Director

Pace Center for Civic Engagement, Princeton University | Senior Associate Director

All Fields Must Be Completed.

Student Information:

First Name: _____ Last Name: _____

Age: _____ Date of Birth: _____ Gender: _____

School: _____ Grade: _____

Home Phone: _____ Cell Phone: _____

Home Address: _____

Email Address:

Parent/Guardian Information:

First Name: _____ Last Name: _____

Place of Employment: _____ Work Phone: _____

Home Phone: _____ Cell Phone: _____

Home Address: _____

Email Address:

Emergency Contact Information (Must Be Different Than Parent/Guardian):

First Name: _____ Last Name: _____

Relationship to Student: _____ Work Phone: _____

Home Phone: _____ Cell Phone: _____

Email Address:

Please indicate how your child/ward will get to and from Community House Programming.

- My child/ward, _____ has my permission to walk from home/school to the program and back home after the program.

- My child/ward, _____ has my permission to have the individuals noted below, drive him/her to Community House and pick him/her up from Community House.
 - Name: _____
 - Phone: _____

 - Name: _____
 - Phone: _____

- My child/ward, _____ has my permission to ride Community House provided transportation when applicable (ex. field trips, special events, etc.)

Parent/Guardian Signature: _____

Date: _____

Program Descriptions & Schedules

Community House Big Sibs (Eligibility: Youth in Grades 2-5)

Community House Big Sibs is a student-led mentorship project connecting University students with elementary school students in Princeton Public Schools. Mentors build long-term relationships with individual students and help foster academic and social and emotional growth. Community House Big Sibs works with elementary aged students in grades 2-5. For the 2022-2023 school year, Community House Big Sibs will take place on the Princeton University Campus.

- Yes, my child will participate in Community House Big Sibs

Community House After School Programs (Eligibility: Youth in Grades 6-12)

This program is dedicated to supporting middle and high school students, working to ensure they experience both academic success and social-emotional wellness by way of ongoing tutoring and mentoring support. The program provides mentoring, academic tutoring, subject-specific study circles, writing workshops, field trips, college tours and other activities. Tutor-mentors are also able to provide AP course support and help with the college application process. For the 2022-2023 school year youth who are fully vaccinated may attend Community House after school programs at Community House. Unvaccinated youth are welcome to request virtual tutoring support. **Schedule:** Monday-Thursday 3pm-6pm

- Yes my child will participate in Community House After School Programs:
 - In-Person at Community House for youth fully vaccinated against Covid-19
 - Virtual via Zoom

Indicate days your child will participate & times here	Monday	Tuesday	Wednesday	Thursday

Community House SAT Prep (Eligibility: Youth in Grades 9-12)

During the SAT Prep Program volunteers teach Math and English sessions twice a week and also provide one-on-one tutoring to help high school students develop standardized test-taking skills. We also offer AP testing support for students currently enrolled in AP courses and students hoping to take AP courses and respective AP tests. For the 2021-2022 school year youth who are fully vaccinated may attend SAT prep sessions at Community House. Unvaccinated youth are welcome to request virtual tutoring support. **SAT Prep Schedule:** Students meet 1:1 with an assigned tutor by appointment.

- Yes, my child will participate in Community House SAT Prep:
 - In-Person at Community House for youth fully vaccinated against Covid-19 or Princeton Public Library
 - Virtual via Zoom

Indicate available times here	Mon.	Tues.	Wed.	Thur.	Fri.	Sat.	Sun

MEDICAL INFORMATION FORM

Please attach copies of information on the health and wellbeing of your child/ward (“Participant”), including copies of any health insurance cards or other documents. Include below any information you feel is important for us to know that may affect the Participant’s ability to fully participate in Community House Programs.

- **Permission for medical treatment for my child/ward, _____, and obligation to assume medical expenses:**

In the event that I am not immediately available, should the Participant suffer a serious or life-threatening injury for which medical treatment may be necessary, I hereby authorize an appropriate adult member to engage qualified medical personnel to initiate any necessary medical treatment or care. In the event of such an injury, it is understood that, where practical, a representative of Princeton University will use all reasonable efforts to notify me prior to initiating medical treatment for the Participant. If I am not available, I give my permission to any such physician or other medical personnel to provide such medical treatment as that individual deems medically appropriate. I understand and agree that I am responsible for all medical care expenses incurred to treat the Participant's injuries including, without limitation, physician, hospital, lab, drug, and device expenses.

Please list any known allergies or medical conditions we should be aware of:

Parent/Guardian Name (print)

Parent/Guardian Signature

Date

PARENT/GUARDIAN WAIVER AND CONSENT FORM

Please indicate your consent by initialing each section and providing your signature. All students who participate in Community House programs must have this form completed and signed.

- I certify that I am the parent or legal guardian authorized to sign this waiver and consent form on behalf of my child/ward ("Participant").

Name of Parent/Legal Guardian (print):

Home Address: _____ Email Address: _____

Home Phone: _____ Cell Phone: _____

- **Permission to participate and abide by code of conduct** _____ **Your initials**

I am the parent/guardian of _____, now known as the Participant, and hereby give my permission for the Participant to participate in Community House with the understanding that there will be a variety of activities and events associated with Community House which will take place on or near the Princeton University campus, unless otherwise notified.

- **Permission to participate in field trips:** _____ **Your initials**

I authorize the Participant to go on field trips that may be scheduled and sponsored by Community House, with the right to forego their participation in a specific trip. I acknowledge that participation in the field trips could expose the Participant to potential risks, including forces of nature (e.g., lightning, storms, freezing temperatures), slips and falls, physical exertion associated with outdoor activities, injuries inflicted by insects and animals, and other natural hazards. I agree that neither I nor any member of my family will seek to hold Princeton University, Trenton Arts at Princeton, and/or their respective students, officers, trustees, agents, representatives, or employees ("Organizers") liable for any damage or injuries which may be sustained to Participant, and hereby waive, release and agree to hold them harmless from any claims, demands, damages, liabilities, expenses, losses of every nature and kind which may arise out of, or in connection with, the Participant's involvement in the field trips. Neither I nor any member of my family will hold the Organizers responsible for incidents beyond their control. I understand pursuant to New Jersey law that any damage or injury sustained by the Participant as a result of an automobile accident will be covered by my automobile insurance policy (under PIP/No Fault).

- **Permission to photograph or film the Participant:** _____ **Your initials**

In recognition of the Participant's participation in programs, events, and activities in conjunction with Princeton University, I hereby grant The Trustees of Princeton University permission to videotape,

photograph or otherwise record the Participant and to use such recordings and biographical data in any media, on a perpetual basis, for non-commercial purposes. I also grant permission for the Participant to be interviewed, photographed, videotaped, or otherwise recorded by media unaffiliated with the University that may cover these programs, events, and activities.

Approval to be transported by WeDriveU: _____ **Your initials**

I hereby give my approval for the Participant to be transported from a designated pick-up point to and from Princeton University by WeDriveU, a third-party bus company engaged by Princeton University. I am aware that there will be no supervision of the Participant by any of the Organizers until the Participant arrives at the designated location on Princeton University's campus. I acknowledge that participation in WeDriveU busing could expose the Participant to property damage or physical injury or death arising from a vehicle accident. I agree that neither I nor any member of my family will seek to hold the Organizers liable for any damage or injuries which may be sustained to the Participant, and hereby waive, release, and agree to hold them harmless from any claims, demands, damages, liabilities, expenses, losses of every nature and kind which may arise out of, or in connection with, the Participant's involvement in the transportation of the Participant to Princeton University's campus. Neither I nor any member of my family will hold the Organizers responsible for incidents beyond their control. I understand pursuant to New Jersey law that any damage or injury sustained by my child as a result of an automobile accident will be covered by my automobile insurance policy (under PIP/No Fault).

● **Approval to participate, waive, release, agree to hold harmless** _____ **Your initials**

I hereby give my approval for the Participant to participate in Community House and waive, release, and agree to hold harmless the organizers, facilitators, teachers, participants, and any other personnel involved in the operation, organization, sponsorship, supervision, or participation of Community House, including without limitation, the Organizers, from any claims, demands, damages, liabilities, expenses, losses of every nature and kind or cause of action of any nature that may be available to the Participant or their parents and/or legal guardians, arising out of, or in connection with, the Participant's participation in Community House.

Understanding the risks of Covid-19 _____ **Your initials**

I understand that while the Pace Center for Civic Engagement has undertaken reasonable steps to lessen the risk of transmission of COVID-19 in connection with Community House programs, the Pace Center for Civic Engagement/ Community House is not responsible in any manner for any risks related to COVID-19 in connection with Community House programs. I understand that the World Health Organization has classified the COVID-19 outbreak as a pandemic. I further understand that COVID-19 is a highly contagious and dangerous disease, and that contact with the virus that causes COVID-19 may result in significant personal injury or death. I agree that neither I nor any member of my family will seek to hold the Organizers liable for any damage or injuries that may be incurred, directly or indirectly, now or into the future, in any way related to COVID-19 and in connection with my child's participation in Community House programs and any travel related thereto.

Understanding the COVID-19 policy _____ **Your initials**

I understand that the Participant is required to be fully vaccinated and boosted before attending Community House programs. I understand that the Participant will also be required to wear a mask at all times while participating in Community House programs. I also understand that Princeton University's COVID-19 policies may evolve as the pandemic continues, and that the Participant must abide by these policies or else risk expulsion from Community House.

Parent/Legal Guardian Signature: _____

Date: _____