



City of Las Vegas
Department of Youth Development and Social Innovation
lasvegasnevada.gov/Residents/Education/Strong-Start-Academies

STRONG START GO MOBILE PRE-K PARTICIPANT INFORMATION & PARENT/GUARDIAN AGREEMENT

To complete the enrollment process, registration form must be complete and additional documentation must be submitted before the participant can attend the program.

PARTICIPANT NAME:		DESIRED PROGRAM LOCATION (EAST OR WEST LAS VEGAS):			
STREET ADDRESS:		AGE:	DATE OF BIRTH:	SEX: <input type="checkbox"/> M <input type="checkbox"/> F	
CITY:		STATE: ZIP:	RACE: <input type="checkbox"/> White <input type="checkbox"/> Latino <input type="checkbox"/> African American		
HAS YOUR CHILD PREVIOUSLY ATTENDED PREK? IF SO, WHERE?		HOME PHONE:	<input type="checkbox"/> Asian / Pacific Islander		
PARENT/GUARDIAN (1)		RELATIONSHIP TO PARTICIPANT:			
STREET ADDRESS (IF DIFFERENT FROM PARTICIPANT)		HOME PHONE:	EMAIL:		
CITY: STATE: ZIP:		ALTERNATE PHONE (E.G. CELL)	BUSINESS PHONE:		
PARENT/GUARDIAN (2)		RELATIONSHIP TO PARTICIPANT:			
STREET ADDRESS (IF DIFFERENT FROM PARTICIPANT)		HOME PHONE:	EMAIL:		
CITY: STATE: ZIP:		ALTERNATE PHONE (E.G. CELL)	BUSINESS PHONE:		

EMERGENCY CONTACT / AUTHORIZED ESCORTS: List individuals who can respond to an emergency in the event that the legal parent(s)/guardian(s) cannot be reached. Authorized persons listed below (e.g.: other custodial parent/3rd party person) must be able to escort the participant from the program.

NAME	RELATIONSHIP	DAY PHONE	NIGHT PHONE	ALTERNATE PHONE	PARENT (1)/(2)

MEDICATION: YES NO (If yes, please fill out the CLV Medication Release form and attach child's photo.)

HEALTH ISSUES / ALLERGIES: _____

SPECIAL NEEDS / ACCOMMODATIONS: (Please explain any specific health issues or accommodations that may be needed for participation in program.)

FEES: The Strong Start GO Mobile Pre-K program is a free service for families that reside within the program zip codes and meet the program's income guidelines. To qualify for the program, parents/guardians must provide income verification for all adults living within the household. The Department of Youth Development and Social Innovation uses 2018 Federal Poverty Guidelines for income verification purposes. Initial _____

REQUIRED DOCUMENTATION: To complete program enrollment, parents/guardians must provide the following documentation: valid photo I.D., current immunization records, and income verification for each adult living in the household. Examples of acceptable income verification documents include W-2, 30 days of recent paycheck stubs, and/or notarized letter from employer stating hourly/weekly/monthly wages. Initial _____

LATE ARRIVAL/PICK-UP POLICY: Children must be dropped off and picked up at the designated start and end times. If they are not picked up at the designated end time, every effort will be made to contact the parent/guardian or contacts on the Emergency Contact Form. A second late pick up will result in a parent conference. A third late pick up will result in families required to attend the program with the child. Initial _____

SIGN-IN/SIGN-OUT: I understand that each child must be signed in and out daily. The only person(s) authorized to pick up the child are those listed on this form and a photo ID must be shown every time. Initial _____

PARENT HANDBOOK: I have received and will read the policies and procedures outlined in the parent handbook. Initial _____

PHOTO/VIDEO POLICY: During City-sponsored programs and events, City Staff may take photos and or video of participants that may be used in professionally- designed City publications and promotional materials. Please ask staff for full policy. Initial _____

RELEASE OF LIABILITY AND INDEMNIFICATION

As a condition to being granted access to any facility owned by the city of Las Vegas, and authorization to participate in any event or program, including, without limitation, any class, tournament, special event or other activity administered or sponsored by the DEPARTMENT OF YOUTH SERVICES AND SOCIAL INNOVATION of the City, the undersigned, by signing below at the appropriate signature line, acting either (i) for himself or herself as a participant ("Participant") in an event or program administered or sponsored by the DEPARTMENT OF YOUTH SERVICES AND SOCIAL INNOVATION, or (ii) as the parent or legal guardian of the Participant on behalf of the Participant, and in either case acting as the representative of the heirs and of the executor or administrator of the estate of the Participant, hereby now and forever, waives and releases the city of Las Vegas, its officers, employees, agents and representatives, from any and all liability for personal injuries and/or property damage sustained or suffered by the Participant as a result or consequence of the Participant participating in any of the aforementioned events or programs. In addition to the waiver and release set forth herein, the undersigned, as the Participant, or as the parent or legal guardian of the Participant, agrees to defend, indemnify and hold the City, its officers, employees, agents and representatives, harmless from any and all claims, demands, suits, judgments, awards or any other form of liability for personal injuries and/or property damage, which is the result of the Participant's negligent act or omission in connection with the Participant's participation in any of the aforementioned events or programs administered or sponsored by the DEPARTMENT OF YOUTH SERVICES AND SOCIAL INNOVATION, or use of any facility owned by the city of Las Vegas in connection therewith.

Parent (1) / Guardian Signature Date

Parent (2) / Guardian Signature Date