



Registration/ Consent Form For After School Programs



Montgomery County Public Schools



Check here if new address/phone/email

Student's Name (Last, First) _____ Student ID# _____

Birth Date (mm/dd/yy) _____ Gender (M/F) _____ Grade _____ Ethnicity (optional) _____

Parent/Guardian Name (Last, First) _____

Street Address _____ City _____ State _____ Zip _____

Email _____

Home Phone _____ Work Phone _____ Cell Phone _____

List Allergies _____

Please Select Transportation:

- I will ride the activity bus at 5:25
- I will walk home
- Guardian will pick up
- Public Transportation

Your signature below signifies that you acknowledge the following:

The participant assumes all risks associated with participation in Excel Beyond The Bell (EBB); Montgomery County Collaboration Council and Montgomery County Recreation (MCR) assume no liability for injury or damages arising from participation in the program. The participant consents to emergency treatment. The participant also consents to the Montgomery County Collaboration Council's, MCR's, and Excel Beyond The Bell's use of any photographs taken or videos made of the program for promotional and educational purposes. If the participant is a minor, the parent or guardian approves his/her participation in the program. Neither the instructors nor any of the staff are responsible for children prior to or after the scheduled programs.

Your child's after school program is part of the Excel Beyond the Bell initiative, a program run by the Montgomery County Collaboration Council with support from Montgomery County Public Schools (MCPS). MCPS is collecting information that helps us evaluate these programs. This report will be shared with our elected officials, out-of-school time programs providers, and funders. MCPS will use data from your child's school record for this evaluation. MCPS will analyze this data and produce a report that describes the student population served by out-of-school time programs and the impact made on school performance.

All information will be reported in summary tables, with NO individual students identified. At no time will MCPS or the Montgomery County Collaboration Council share any of your child's personal information with the after school program or any other entity. With the assistance of the Collaboration Council, your child's after school program will provide MCPS with your child's MCPS Student Identification Number (6 digits), and complete name. MCPS will then access the following confidential information about your child to evaluate the programs:

- Confirmed Student ID
- Demographic information: age, grade in school, race/ethnicity
- Participation in Free and Reduced-price Meals System (FARMS), special education or English for Speakers of Other Languages (ESOL) services
- Attendance in school
- Marking period grades (report cards)
- Eligibility for MCPS extracurricular activities

Your permission is strictly voluntary and has no impact on your child's participation in this after school program. You may decline to participate and have the right to withdraw your permission at any time. Please sign this consent form regarding your understanding of the evaluation and your willingness to allow MCPS evaluators access to your child's information as outlined above. If you have any questions, please call the EBB Hotline at 240-777-6881.

Please be sure to check one of the boxes below:

- I give my permission to allow MCPS access to my child's information outlined above for program evaluation ONLY.
- I do not give permission to allow MCPS access to my child's information outlined above for program evaluation.

Parent's Signature _____ Date _____