



Dates: 6/28-7/28

Days: Tuesday, Wednesday, Thursday

Time: 8:30 - 2:30

Location: Barnes Butte Elementary

Who: Current Kindergarten - 4th Grade (Current 5th grade students can enroll in the CCMS Summer School Sessions)

The Crook County School District will once again be offering a fun and engaging Summer Blast Program for our K-4 students. For any questions about Summer Blast Stem Camp please email Jonny Oelkers at jonathan.oelkers@crookcounty.k12.or.us or call at 541-903-0565. To sign up fill out the attached registration pages, or scan the QR code below and register online:



Scan with your camera to sign up online



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Student Info:

Child's First & Last Name _____

T Shirt Size (Circle One): YXS YS YM YL YXL AS AM AL AXL

Student's Current Grade Level: _____

School attended during 2021-22: _____

Does your student have an IEP: Yes / No

Does your student have a 504: Yes / No

List below any medical issues your child's teacher should know about:

Transportation

_____ My child will be dropped off and picked up.

_____ My child will walk to and from school (3rd,4th,5th. only)

_____ My child will ride the bus. (Call 541-447-7789 to arrange bussing by June 1st.)

Parent Guardian Info

Parent/Guardian: _____

Parent's phone numbers: (home) _____ (work) _____

Parent Guardian Mailing Address: _____

Parent Guardian Email: _____

Emergency Contact Name: _____

Emergency Contact Phone Number: _____

Planned Attendance

This summer, each Summer Blast week will be a standalone option. Students can attend all five weeks, or they can attend as little as one week. **Please indicate your intention for each week below:**

Week #1: (6/28 - 6/30)

Yes, my child will attend this week

No, my child will not attend this week

Week #2: (7/5 - 7/7)

Yes, my child will attend this week

No, my child will not attend this week

Week #3: (7/12 - 7/14)

Yes, my child will attend this week

No, my child will not attend this week

Week #4: (7/19 – 7/21)

Yes, my child will attend this week

No, my child will not attend this week

Week #5: (7/26 – 7/28)

Yes, my child will attend this week

No, my child will not attend this week

Photo Opt Out

Please excuse my child from any photos

Crook County School District

WAIVER OF LIABILITY AND HOLD HARMLESS FOR PARTICIPATION IN EXTRACURRICULAR PROGRAMS

Student Name: _____ Grade: _____

Address: _____

Parent(s)/Guardian(s) Name(s): _____

Parent/ Guardian phone: Mobile: _____ Home: _____ Other: _____

Student's participation in the Crook County School District's summer school programs activities is voluntary. I understand that participation in this Activity may expose the above student to risks. Some of these risks are foreseeable, but some are unforeseeable. Examples of risks include physical injury, emotional injury, property damage, economic loss, noneconomic loss, and exposure to illness including COVID-19. Some of these risks cannot be eliminated due to the nature of the activities. I understand that these risks could cause harm to me, my property, and other persons.

The novel coronavirus ("COVID-19"), has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and is believed to spread mainly from person-to-person contact. While rules, guidance, and personal discipline may reduce this risk, the risk of serious illness and death does exist. **Crook County School District ("District") cannot completely mitigate the transfer of communicable diseases like COVID-19 especially when involved in Extracurricular programs and activities. Participation in Extracurricular programs includes possible exposure to and illness, injury, or death from infectious diseases including COVID-19.**

In consideration for providing my child the opportunity to participate in extracurricular programs and activities provided by Crook County School District, and any related transportation to and from activities and events, both my child and I voluntarily agree to waive and discharge any and all claims against District and release it from liability for any exposure to or illness or injury from an infectious disease including COVID-19, including claims for any negligent actions of the District or its employees or agents, to the fullest extent allowed by law, for myself, my child, our estates, our heirs, our administrators, our executors, our assignees, and our successors.

I also agree to release, exonerate, discharge and hold harmless the District, its Board of Directors, the individual members thereof, and all officers, agents, employees, volunteers, and representatives from all liability, claims, causes of action, or demands, including attorney fees, fines, fees, or other costs (e.g. medical costs) arising out of any injury, including exposure to or illness or injury from an infectious disease including COVID-19, which may result from or in connection with my child's participation in extracurricular programs and activities. I further certify and represent that I have the legal authority to waive, discharge, release, and hold harmless the released parties on behalf of myself and the above-named student.

I also understand and agree that in consideration for participating in any programs and/or activities and any related transportation to and from events, Student is committed and agrees to isolate and quarantine if exposed to COVID-19.

I certify that I have read this document in its entirety and fully understand its contents. In exchange for the opportunity to participate in the extracurricular programs and activities, the above-named student and I freely and voluntarily assume all risks of such hazards and notwithstanding such, release District from all liability for any loss regardless of cause, and claims arising from the student's participation in the extracurricular programs and activities.

Parent/Legal Guardian Signature

Date