

WELCOME TO HIP WAH SUMMER PROGRAM 2010

PROGRAM SITE

Hip Wah 2010 is located at Redwood Day School at 3245 Sheffield Avenue in Oakland. For additional information, visit our website at www.hipwah.org. (Please do not contact Redwood Day School for information on Hip Wah.)

ORIENTATION (1st Day of Class)

Date: Monday, June 28, 2010 – Attendance for new families is mandatory

Time: 8:30 to 9:30 AM

Place: Redwood Day School (See mapquest website for directions)
3245 Sheffield Avenue
Oakland, CA 94602

Parking: Park in the lot next to the school or on MacArthur. Do not park along the curb in front of the school or across the street from the school. See attached parking policy.

FORMS

Deadline: April 30, 2010 (RETURN COMPLETED FORMS AND CHECKS)

Return to: Hip Wah Registrar
4200 Park Blvd. PMB#505
Oakland, CA 94602

The following forms are required for each child. Please retain a copy of the completed form for your records.

- 1) Emergency Form
- 2) Student Medication Administrative Form
- 3) Parent Participation Form
- 4) Hip Wah T-shirt Order Form
- 5) Lunch Order form (Required even if not ordering lunch)
- 6) Extended Care Form (Required even if not using Extended Care)
- 7) Field trip drivers (optional)

CHECKS: Write a separate check payable to “Hip Wah” for each item and for each child. Please write your child’s name on each check. DO NOT WRITE ONE CHECK - NO EXCEPTIONS.

- _____ (1) \$595.00 Program Fee. Non-refundable.
- _____ (2) \$100.00 Parent Participation Fee. (Refunded after the end of program & fulfillment of parent participation.)
- _____ (3) Check for additional T-Shirts (see T-shirt order form)
- _____ (4) Check for Extended Care [Payable to “Hip Wah Day Care”]
- _____ (5) Check for Lunch Order (see Lunch Order form)

**Failure to return forms and fees by deadline will result in your child being dropped from the Program and his/her place given to a child on the waiting list.
There is a \$25.00 fee per returned check. Fees are non-refundable**

2010 HIP WAH SUMMER PROGRAM - EMERGENCY FORM

Child's Last Name _____ First Name _____ Class _____

Home address _____

City _____ Zip Code _____

Home telephone: area code _____ number _____

Birthdate: Month _____ Day _____ Year _____

Allergies/Special Needs/Medications/: _____

Mother/Parent/Guardian Last Name _____ **First Name** _____

Home telephone: area code _____ number _____

Day (work) telephone: area code _____ number _____

Cell phone: area code _____ number _____ Pager _____

Email address: _____

Father/Parent/Guardian Last Name _____ **First Name** _____

Home telephone: area code _____ number _____

Day (work) telephone: area code _____ number _____

Cell phone: area code _____ number _____ Pager _____

Email address: _____

Other Emergency Contact:

Name: _____ Relationship: _____

Telephone: area code _____ number _____

Siblings at Hip Wah:

1. Last Name _____ First Name _____ Class _____

2. Last Name _____ First Name _____ Class _____

MEDICAL RELEASE

In case of a crisis/medical emergency, at school or during field trips, Hip Wah is authorized to act on my behalf for the safety and welfare of my child. In case of a non-emergency injury, I understand that Hip Wah will call parent/guardian named above for instructions.

Signature of parent/guardian _____ Date _____

2010 - HIP WAH SUMMER PROGRAM
STUDENT MEDICATION ADMINISTRATION POLICY (2 pages)

PREREQUISITES:

If it is necessary for a student to take medication during Hip Wah or extended care hours, or if an emergency medical situation arises in which a student were to urgently need medication on site (e.g., an asthmatic attack or severe allergic reaction), Hip Wah personnel may administer medications prescribed by a doctor upon the written request of the parents, provided the following conditions have been met:

1. The student's parent or legal guardian has a written request on file that Hip Wah personnel administer the medication, and has given explicit written instructions describing the purpose of the medication, and the time and manner in which the medication is to be administered, as well as termination date, if appropriate. In some cases, specialized training may be required (eg, proper use of an inhaler device or an EpiPen), and parents must notify Hip Wah staff of the type of training necessary.
2. A physician has prescribed the medication for use by the student (for over-the-counter as well as prescription-only medications).
3. Medication is clearly labeled in its original container, and is provided by the parent/guardian.

If a parent/guardian deems that a student is qualified to self-administer medication, the above conditions must still be met, except that the written instructions from the parent must also specify that the student is able to self-administer the medication, as well as the conditions when this should occur.

If a parent/guardian wishes to come on site to administer medication to his/her child, prior arrangement should be made with Hip Wah staff to minimize disruption of instruction.

Hip Wah does not assume responsibility for administration of medication to a student by the student him/herself, or by his/her parent/guardian.

A written log should be kept of all medications administered to students by Hip Wah staff, including the date, time and dosage of medication administered. If medication is administered to a student in an emergency situation, the parent/guardian or other emergency contact person will be notified immediately.

MEDICATION STORAGE AND DISPOSAL

All medications will be kept in a secure, centralized location, and preferably administered from there. If there are specific temperature requirements for how a particular medication needs to be stored, the parent/guardian must make the necessary arrangements with Hip Wah staff.

There should be one primary staff person designated to be responsible for proper storage and administration of student medications, and record keeping. A back-up staff person should be designated as well. A list of all students who have medication stored on-site should be maintained.

There may be exceptions to medications being stored in a centralized location, e.g., a student is at risk for life-threatening anaphylaxis and needs to have an EpiPen on his/her person at all times. In such situations, there must be written notification from the parent/guardian that the student is allowed to carry his/her own medication at Hip Wah and that the student is qualified to administer it to him/herself.

Medications should be returned to the parent/guardian at the end of the session (or other specified time). Medication may only be sent home with the student if the parent/guardian has given permission for this.

STUDENTS WITH KNOWN POTENTIALLY SERIOUS HEALTH ISSUES

Parents/guardians are responsible for informing Hip Wah staff of their child's potentially serious medical problems, e.g. asthma, severe allergic reactions, seizures, etc. If a student has severe asthma, or a history of severe allergic reactions to food or insect bites, especially anaphylaxis, the appropriate Action Plan (see attachments) must be completed and on file. The student's teachers should be informed of this potentiality.

RELEASE OF INFORMATION

All pertinent medical information regarding a student's health status or medication needs will be shared with Hip Wah personnel on a need to know basis. In a medical emergency, all pertinent medical information about the student will be provided to medical personnel or any other service providers on a need to know basis.

PARENTAL CONSENT TO ADMINISTRATION OF MEDICATION TO CHILD/RELEASE OF INFORMATION/WAIVER OF LIABILITY

- 1) I have read the 2010 Hip Wah Student Medication Administration Policy thoroughly and understand its contents.
- 2) I have provided Hip Wah with **all** information pertaining to my child's medication needs by completing the Medication Information Form and Medication Action Plan. I understand that Hip Wah personnel will use the information to assist in the administration of medication to my child.
- 3) I consent to the release of any pertinent information in order for Hip Wah to follow my instructions for the administration of medication to my child. I also consent to the release of any pertinent information to all medical personnel or any other service providers in the event that my child needs urgent or emergency medical care.
- 4) I, _____, as the parent of _____ warrants and agrees that I am responsible for the appropriate administration of medications to my child by providing all necessary information to Hip Wah. I further agree to refrain from instituting any lawsuit or other proceedings against Hip Wah and to indemnify and hold harmless Hip Wah from any further claims against Hip Wah arising out of the aforementioned Student Medication Administration Policy; the Medication Information Form and Medication Action Plan.
- 5) I understand that the aforementioned information and consents are current and operative until revoked by me in writing.

Signature of Parent/Guardian

Date

Print Name of Parent/Guardian

**HIP WAH SUMMER PROGRAM 2010
PARTICIPANT AGREEMENT AND WAIVER OF LIABILITY**

NAME OF PARTICIPANT _____ **CLASS** _____

PARTICIPANT AGREEMENT

I have provided comprehensive and accurate information about my child's health and any other conditions he/she may have, (such as allergies, asthma, mental health) that would effect his/her participation in the Hip Wah Summer Program. I agree that my son/daughter is in good health and can participate in all Hip Wah Program activities.

I give permission to the Hip Wah Summer Program to use, reprint, or otherwise publish any photographs, videos or other medium taken of me or my child and written or artistic materials produced by me or my child during the course of the Program. I understand that such material will be used by the Hip Wah Summer Program for educational, outreach and fund raising purposes to further enhance the Hip Wah Summer Program.

X _____
Signature of Parent/Guardian

x _____
Date

WAIVER OF LIABILITY

I, the parent/guardian of _____, release, waive, discharge and agree not to sue the Hip Wah Summer Program, including its Board of Directors, employees, volunteers and agents for liability of any and all claims resulting in any damages from my child's participation in the Hip Wah Summer Program.

I have read and fully understand the aforementioned terms. I understand that I am giving up my substantial rights freely and voluntarily. I intend my signature to be a complete and unconditional release of liability of the Hip Wah Summer Program.

X _____
Signature of Parent/Guardian

X _____
Date

HIP WAH SUMMER PROGRAM 2010 PARENT PARTICIPATION

Child's Last Name _____ First Name _____

Class (e.g. Horse) _____

Siblings enrolled at Hip Wah:

1. Name: _____ Class: _____

2. Name: _____ Class: _____

Parent/Guardian Name: _____

Parent/Guardian Phone: (_____) _____ Email address: _____

You are required to fulfill one parent participation task for each child enrolled at Hip Wah. Please indicate your first, second and third choices. If you do not return this form with your choices indicated, we will assign a task for you. (2 page descriptions attached)

- _____ Orientation Monday, June 28 (7:30-9:30 AM)
- _____ School set-up Saturday, June 26 (All volunteers must attend at 9 AM.)
- _____ Open House Saturday, July 17 two shifts 8:30 AM **and** 10:30 AM
- _____ Music Program Saturday, July 24 @ Redwood Day School (TBD)
- _____ School clean-up Friday, July 23 (All volunteers must attend at 2:00 PM)
- _____ Room parent (e.g., cooking and field trip coordinator for class)
- _____ Raffle/Fundraising Committee
- _____ Newsletter
- _____ Photographer
- _____ Lunch Program Committee
- _____ Program Support/Clerical
- _____ Field Trip Driver -**Not available for all parents – see description under Parent Participation**
(Hip Wah III parents-please see your packet.)
- _____ Special projects you would like to share with the program. Please describe:
- _____ Interested in joining the Board for the Summer 2011 (checking this choice does not fulfill 2010 parent participation)
- _____ I am unable to participate. **I will pay the \$100 parent participation fee to Hip Wah.**

(Keep this page for your records-do not return)

Hip Wah Summer Program 2010

Description of Parent Participation Duties and Committees

ORIENTATION: Monday, June 28, 2010, 7:30 a.m.

Bring refreshments; set up chairs and tables; staff orientation packets; staff T-shirts table; clean-up.

SCHOOL SET-UP: Saturday, June 26, 2010, 9:00 a.m.

All parent volunteers must report for this task at 9:00 AM.

Latecomers will not receive credit for parent participation.

Transport supplies from storage to school site; clean classrooms as necessary; cover classroom shelves so they will not be accessible; re-arrange furniture to teachers' specifications; label classrooms; label children's cubbies; assist teachers in arranging classrooms; other tasks as assigned.

OPEN HOUSE: Saturday, July 17, 2010 (two shifts 8:30 AM and 10:30 AM)

All tasks necessary for set up for Open House/Food Festival. Staff Food tables (serve and replenish food); staff T-Shirt/Raffle Ticket table as needed; sell Music festival tickets; assist teachers with Treasure Hunt game if needed; all tasks associated with clean up .

MUSIC PROGRAM/26th Anniversary Celebration: Saturday, July 24, 2010 (Time TBD)

Design and print programs; produce and distribute music program tickets; coordinate music program tickets sales; coordinate refreshment assignments to parents; help 25th Anniversary Committee as needed; set up/cleanup; other tasks as assigned.

SCHOOL CLEAN-UP: Friday, July 23, 2:00pm

All parent volunteers must report for this task on time. Latecomers will not receive credit for parent participation. Pack up Hip Wah supplies; restore classrooms to original conditions; other tasks as assigned.

ROOM PARENT

Act as liaison between teacher and parents; plan weekly cooking projects with teacher; shop for cooking project ingredients and supplies; plan and organize field trips as needed.

(Keep this page for your records-do not return)

NEWSLETTER

Assist Newsletter editor in preparing newsletter.

PHOTOGRAPHER

Take pictures for newsletter; take class pictures; sell pictures at Open House.

RAFFLE/FUNDRAISING COMMITTEE

Solicit items for raffle; package items for raffle; coordinate raffle ticket sales
coordinate children's prizes for selling most tickets; produce outreach materials, e.g. letters, flyers;
coordinate outreach.

LUNCH PROGRAM

Parents to coordinate lunch program with Site Director. The menu is set. Parents do not have to be at school during lunch. The parent duties are: purchase supplies
bring fresh fruit or salad as scheduled; other tasks as needed.

PROGRAM SUPPORT

Purchase supplies; assemble class attendance binders; assemble day care binders; assemble lunch binders; copy materials for staff as needed.

FIELD TRIP DRIVER

Provide one complete roundtrip transportation, (1) complete field trip driver form, (2) provide copies of driver's license, (3) vehicle registration, (4) proof of auto insurance, and DMV driving record (mail in form is included in this packet). Please note that mail in requests take several weeks and may not be sent to you in time for your child's field trip.

1st grade (Monkey) - no field trips planned at this time

2nd grade (Sheep) - one field trip

3rd grade (Horse) - one field trip

4th grade (Snake) - one field trip

5th grade (Dragon) - two field trips

6th grade (Hip Wah 2) - two field trips

* Hip Wah 3 parents have already committed to drive on some trips on the pre registration HW3 application.

The URL for the DMV form is: <http://www.dmv.ca.gov/forms/inf/inf1125.pdf>

All items above must be received by April 30, 2010.

VIDEOGRAPHER

Take video of Music Festival and other events.

BOARD MEMBER

New Board Member for 2011.

**HIP WAH SUMMER PROGRAM 2010
T-SHIRT ORDER FORM**

Child's Last Name _____ First Name _____

Name of Class (e.g. Horse) _____

Each child enrolled will receive one free Hip Wah 2010 T-shirt (Year of the Tiger) at the Orientation. Students are required to wear this year's black t-shirt or previous years' red t-shirts every day of the program. **Children can wear previous Hip Wah red or black t-shirts and any red/black t-shirt if they do not have a clean Hip Wah t-shirt.**

Please complete the form below indicating a size for your child's FREE t-shirt as well as any additional t-shirts you wish to purchase. We suggest that you order a t-shirt one size larger for your child.

Item/Size	Child Med (10-12)	Child Lge (14-16)	Adult Small	Adult Med	Adult Large	Adult XL	Total # of Items	Total Cost
Free T-Shirt								FREE
Additional T-Shirt (\$15 each)								
Total Amount								

Make check payable to "Hip Wah". A \$25 fee will be charged on any returned check.

<i>Office use only</i>	
<i>Date received :</i> _____	<i>Check #</i> _____ <i>\$</i> _____
<i>Cash</i> _____ <i>\$</i> _____	

[MAKE A COPY OF THE COMPLETED FORM FOR YOUR RECORDS]

Hip Wah Summer Program
Lunch Menu June 28- July 23, 2010

Sun	Mon	Tue	Wed	Thu	Fri	Sat
	6/28 Tofu Chow Mein Fresh Fruit Drink	6/29 Cheese Pizza Green Salad Drink	6/30 Veg. Fried Rice Fortune Cookies Drink	7/1 Meatless Pasta W/tomato sauce Fresh Fruit Drink	7/2 Tofu Chow Mein Fresh Fruit Drink	7/3
4	5 Holiday	6 Cheese Pizza Green Salad Drink	7 Veg. Fried Rice Fortune Cookies Drink	8 Meatless Pasta W/tomato sauce Fresh Fruit Drink	9 Chicken Chow Fun Fresh Fruit Drink	10
11	12 Tofu Chow Mein Fresh Fruit Drink	13 Cheese Pizza Green Salad Drink	14 Veg. Fried Rice Fortune Cookies Drink	15 Meatless Pasta W/tomato sauce Fresh Fruit Drink	16 Chicken Chow Fun Fresh Fruit Drink	17 Open House
18	19 Tofu Chow Mein Fresh Fruit Drink	20 Cheese Pizza Green Salad Drink	21 Veg. Fried Rice Fortune Cookies Drink	22 Meatless Pasta W/tomato sauce Fresh Fruit Drink	23 Free Lunch Veg. Chow Mein Fried Chicken Broccoli Beef Drink	24 Music Program/ 26 TH Anniversary

1. Circle selection by day.
2. \$3.50 per lunch.
3. Make check payable to Hip Wah.
4. Return w/Registration Packet **or** 2 days prior to first order.
5. No substitutions or refunds. Exchange days possible with 2 days prior notice (field trip only)

Child's Name: _____
 Class: _____
 Parent Name: _____
 Phone No. during Hip Wah Hours: _____
 Food Allergies: _____
 # of Paid Lunches: _____ Check Amt: _____

****One Order Form and One Check per Child Please!****
CHECKS OR PAPER MONEY ONLY!

HIP WAH 2010 – EXTENDED CARE PROGRAM REGISTRATION FORM
(Please fill out a form for each child even if you do not need anticipate needing Extended Care.)
Late pickups will be charged \$5 an hour.

Child's Last Name _____ First _____

Birth date Month _____ Date _____ Year _____ Class _____
 Name of siblings in extended care: _____

List special needs: _____

List medications and use: _____

List special interests: _____

- .. I do not need Extended Care at this time. Do not fill out the remainder of this form
- .. Prepaid full time BEFORE CARE (7:45 – 8:45 a.m.) Cost per child: \$85 (10% discount) - DO NOT FILL IN BELOW
- .. Prepaid full time AFTER CARE (2:00 – 6:00 p.m.) Cost per child: \$342 (10% discount) - DO NOT FILL IN BELOW
- .. **Prepaid part time extended care: \$5.00 per hour (fraction of hour rounded to next hour) FILL IN BELOW**
- .. Drop in part time extended care: \$100 prepaid deposit, \$5 per hour - DO NOT FILL IN BELOW (fraction of hour rounded to next hour)

Any day without Signature at time of pickup will incur 4 hours of childcare per day
Place a check mark in each box below to denote each hour of part time childcare
if unsure please leave blank

	7:45-8:45am	2-3pm	3-4pm	4-5pm	5-6pm	Total Hrs.	Signature at time of pickup
Monday, June 28, 2010							
Tuesday, June 29, 2010							
Wednesday, June 30, 2010							
Thursday, July 01, 2010							
Friday, July 02, 2010							
Monday, July 05, 2010							HOLIDAY
Tuesday, July 06, 2010							
Wednesday, July 07, 2010							
Thursday, July 08, 2010							
Friday, July 09, 2010							
Monday, July 12, 2010							
Tuesday, July 13, 2010							
Wednesday, July 14, 2010							
Thursday, July 15, 2010							
Friday, July 16, 2010							
Monday, July 19, 2010							
Tuesday, July 20, 2010							
Wednesday, July 21, 2010							
Thursday, July 22, 2010							
Friday, July 23, 2010							

UPON FULL PAYMENT, A DEPENDENT CARE RECEIPT WILL BE EMAILED IF REQUESTED.

Please provide the email address of the person whom will be sent a receipt.

If your employer requires the use of a specific form, please attach

My signature below acknowledges the terms of the childcare agreement and I will pay amounts due at the conclusion of the program, Friday, July 23, 2010

Signature & Date _____
 Printed _____
 Last name _____ First name _____

MAKE A COPY OF THIS COMPLETED FORM BEFORE MAILING



Redwood Day School

Parking, Carpool, And Public Transit Policy

Traffic Policy

The purpose of Redwood Day School's traffic policy is to:

- reduce risk and improve safety
- support ease of access for our families
- maintain ease of access for all neighbors to move in and out of the neighborhood with minimal disruption during high traffic periods
- maintain good relations with our neighbors

Driving Rules

When driving to drop off, pick up, or to park for an extended period of time, the following rules are essential for safe entry and exit:

- No one should drive faster than twenty-five miles per hour approaching the school.
- A speed limit of five miles per hour should be observed in the parking lot.
- No students should be picked up or dropped off while the car is stopped in the center lanes of traffic.
- All cars should pull to the curb for curbside drop-off or pick-up.
- Cars should never be left unattended at front curb during drop-off or pick-up.

Sheffield Avenue Drop-Off (8:30 A.M. to 8:50 A.M.)

Drivers of cars dropping off children between 8:30 a.m. and 8:50 a.m. should pull as far forward as possible along the white curb directly in front of the school entrance. Drivers who have to leave the car must use the side parking lot. Once children are safely on the sidewalk, cars are expected to move into the flow of traffic as soon as possible, taking precautions to look for oncoming traffic in the center lanes. Under no circumstances are children allowed to exit on the left side of the vehicle. This is required to maintain traffic flow and safety of drop-off. Cars seeking to make a U-turn should do so only at the corner beyond the school.

Sheffield Avenue Pick-Up (2:00 P.M. – 2:15 P.M.)

If a driver arrives too early for pick-up, she/he will be directed to move away from the loading area

Side Parking Lot Use

If you are visiting school for any extended period of time, please use the side parking lot. Children may be picked up after school by a parent, guardian, or childcare provider in front of school or in the yard and then escorted through the gate on the Lower School yard to the side parking lot. Please make sure children are alert upon entering and exiting vehicle and walk with them to the area next to the building so that all pedestrians in the area are readily seen by drivers entering or exiting the parking lot. Parents must manage the children in their care to ensure their safety. Under no circumstances should children be allowed to walk to a parked car without an adult.

Because the driveway is narrow, it is essential that all drivers take extra precautions to assure a safe entrance and exit. When entering the parking lot itself, be sure to move counterclockwise around the parking lot. All cars are requested to park along the fence and to fill up the spaces in the center only after all fence spaces are taken up.

Front Parking Lot Use

The front parking lot is reserved for visitors and emergencies. Also, at no time should anyone exit the front parking lot by backing onto the street.

Carpooling & Public Transit

All staff and parents are encouraged to arrange carpooling or to use public transit whenever possible. For major events, parents are requested to organize carpools to minimize the number of cars requiring parking, thereby reducing the effects on our neighbors.

Parking For Large Events

Parking for large events such as Back to School nights and art and science fairs may spill over onto the street as parking lots are filled. No parking will be allowed on the east side of Sheffield Avenue, Sausal Lane or McKillop Place to assure accessibility of emergency equipment as well as ease of access for all neighborhood traffic. Additional parking is available on MacArthur Boulevard. Redwood Day School will provide traffic monitors before and after the events to direct the flow of traffic and to answer questions.