***KEYSTONE 2022-2023***

***Cultivating and Connecting Community***

***Location****: Daly Elementary School*

***Program Days/Times****: 3:15 pm-5:30 pm, Monday-Thursday*

***Start Date****: Tuesday, September 6th, 2022*

***End Date****: Thursday, May 25th, 2023*

***Grades****: K-5th Grade*

Applications will be available after the Parent Meeting at the Daly and HMS main offices as well as on the District website

Space is limited and will be filled on a first come first served basis by those who submit a fully completed application to either **main office**. You will be notified prior to the start of the program if your student is in the program or on the waitlist.

## Thanks to the 21st Century grant, there is no cost to participate in Keystone this school year!

Keystone will be based out of the multi-purpose gym at Daly Elementary. Pick-up will occur at the double doors next to the gym alongside Mustang Way on the Southside of the building between 5:00-5:30 pm.

Keystone will offer full-day programming from 8:00 am-5:30 pm on the following 6 dates as there is no school for teacher professional development:

***September 23rd, November 4th, January 20th,***

***February 17th, March 10th and May 19th***

**\*\*\*There is NO BUS service (pick-up or drop-off) on these full-day Fridays**!\*\*\*

Four Family Nights are scheduled from 5:00-6:00 pm on the following dates: ***October 27th, December 15th, March 23rd, and May 25th***. There will be a light dinner, games and a showcase of what we’ve been up to at Keystone!

**Questions?: Contact Bryan Dufresne** dufresneb@hsd3.org **(406) 361.0538**

DETACH and KEEP the first page and the calendar for Your Records!

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| --- |
| **2022-2023 KEYSTONE calendar** |
|   |   | **January**  |   |
|   | Holidays\Vacation Days | S | M | T | W | Th | F | S |   |
|   | Family Nights 5:00-6:00 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 2 Winter Break |
|   | PD Day / Keystone 8-5:00 | 8 | 9 | 10 | 11 | 12 | 13 | 14 |   |
|   | PIR No School/No Keystone | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 20- Keystone 8am-5pm |
|   | First & Last Day Keystone | 22 | 23 | 24 | 25 | 26 | 27 | 28 |   |
|   | Early Out / No Keystone | 29 | 30 | 31 |   |   |   |   |   |
|   |   |   |
| **August -** |   | **February**  | 17 Keystone 8am-5pm |
| S | M | T | W | Th | F | S |   | S | M | T | W | Th | F | S |
|   | 1 | 2 | 3 | 4 | 5 | 6 |   |   |   |   | 1 | 2 | 3 | 4 |
| 7 | 8 | 9 | 10 | 11 | 12 | 13 |   | 5 | 6 | 7 | 8 | 9 | 10 | 11 |
| 14 | 15 | 16 | 17 | 18 | 19 | 20 |   | 12 | 13 | 14 | 15 | 16 | 17 | 18 |
| 21 | 22 | 23 | 24 | 25 | 26 | 27 |   | 19 | 20 | 21 | 22 | 23 | 24 | 25 |
| 28 | 29 | 30 | 31 |   |   |   | 22- First Day School | 26 | 27 | 28 |   |   |   |   |
|   |
| **September** |   | **March**  |   |
| S | M | T | W | Th | F | S |   | S | M | T | W | Th | F | S |   |
|   |   |   |   | 1 | 2 | 3 | 1-2 Fair |   |   |   | 1 | 2 | 3 | 4 |   |
| 4 | 5 | 6 | 7 | 8 | 9 | 10 | 5 No School | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 10 Keystone 8am-5pm |
| 11 | 12 | 13 | 14 | 15 | 16 | 17 | 6 Keystone begins! | 12 | 13 | 14 | 15 | 16 | 17 | 18 |   |
| 18 | 19 | 20 | 21 | 22 | 23 | 24 | 23 Keystone 8am-5pm | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 23 Family Night |
| 25 | 26 | 27 | 28 | 29 | 30 |   |   | 26 | 27 | 28 | 29 | 30 | 31 |   | 27-31 Spring Break |
|   |
| **October**  |   | **April**  |   |
| S | M | T | W | Th | F | S |   | S | M | T | W | Th | F | S |   |
|   |   |   |   |   |   | 1 |   |   |   |   |   |   |   | 1 |   |
| 2 | 3 | 4 | 5 | 6 | 7 | 8 |   | 2 | 3 | 4 | 5 | 6 | 7 | 8 |   |
| 9 | 10 | 11 | 12 | 13 | 14 | 15 |   | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 10 Easter Break |
| 16 | 17 | 18 | 19 | 20 | 21 | 22 | 20 No School / No Keystone | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 19- Early Out Community Lunch |
| 23 | 24 | 25 | 26 | 27 | 28 | 29 | 27 - Family Night | 23 | 24 | 25 | 26 | 27 | 28 | 29 |   |
| 30 | 31 |   | 30 |   |   |
|   |   |
| **November**  |   | **May**  |   |
| S | M | T | W | Th | F | S |   | S | M | T | W | Th | F | S |   |
|   |   | 1 | 2 | 3 | 4 | 5 | 4 Keystone 8am-5pm |   | 1 | 2 | 3 | 4 | 5 | 6 |   |
| 6 | 7 | 8 | 9 | 10 | 11 | 12 |   | 7 | 8 | 9 | 10 | 11 | 12 | 13 |   |
| 13 | 14 | 15 | 16 | 17 | 18 | 19 |   | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 19 - Keystone 8-5:00 |
| 20 | 21 | 22 | 23 | 24 | 25 | 26 | 23-25 Thanksgiving | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 25 - Last day & family night |
| 27 | 28 | 29 | 30 |   |   |   |   | 28 | 29 | 30 | 31 |   |   |   | 29 Memorial Day |
|   |
| **December**  | 15 Family Night 22-30 Winter Break | **June**  |   |
| S | M | T | W | Th | F | S | S | M | T | W | Th | F | S |   |
|   |   |   |   | 1 | 2 | 3 |   |   |   |   | 1 | 2 | 3 | 2 - Last Day Early Out |
| 4 | 5 | 6 | 7 | 8 | 9 | 10 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 2 - End Of 4th Quarter |
| 11 | 12 | 13 | 14 | 15 | 16 | 17 | 11 | 12 | 13 | 14 | 15 | 16 | 17 |   |
| 18 | 19 | 20 | 21 | 22 | 23 | 24 | 18 | 19 | 20 | 21 | 22 | 23 | 24 |   |
| 25 | 26 | 27 | 28 | 29 | 30 | 31 | 25 | 26 | 27 | 28 | 29 | 30 |   |   |
|   |

***KEYSTONE 2022-2023 (application)***

Student First Name: MI: Last:

Birthday: Gender (M/F)

Age:

Grade (for ‘22-’23 school year):

Ethnicity: IEP/504 Plan: Yes / No Teacher?:

## Please list in the order you would like to be contacted.

(1) Name: Phone 1: Phone 2: Relationship: Address: **Email:** (program updates will be sent out via email)

|  |  |  |  |
| --- | --- | --- | --- |
| Legal Custody | Lives with | OK to Pick-Up | Receives Mailings |
|  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Legal Custody | Lives with | OK to Pick-Up | Receives Mailings |
|  |  |  |  |

1. Name: Phone 1: Phone 2:

Relationship: Address:

|  |  |  |  |
| --- | --- | --- | --- |
| Legal Custody | Lives with | OK to Pick-Up | Receives Mailings |
|  |  |  |  |

1. Name: Phone 1: Phone 2:

Relationship: Address:

|  |  |  |  |
| --- | --- | --- | --- |
| Legal Custody | Lives with | OK to Pick-Up | Receives Mailings |
|  |  |  |  |

1. Name: Phone 1: Phone 2:

Relationship: Address:

***Incomplete applications will not be accepted and your child will not be registered!***

# Medical Information

Participants in the Keystone Program will be involved in physical activities, activities outdoors, and activities with art supplies. It is important that we be aware of any allergies or medical conditions that may affect your child’s participation.

*Doctor Name:*  *Phone:*

*Serious Health Issues: No* *Yes*

*If Yes, explain*

*Medications: No* *Yes*

*If Yes, explain*

*Allergies: No* *Yes*

*If Yes, explain*

# Fees

The Keystone Program, thanks to the 21st Century federal grant, is free to ALL participants. Regular participation is expected for all Keystone students.

# Attendance

Please check off each day that your student plans to attend Keystone.

|  |  |  |  |
| --- | --- | --- | --- |
| **Monday** | **Tuesday** | **Wednesday** | **Thursday** |
|  |  |  |  |

*Will there be consistent variations in attendance (i.e. sports, doctor appointments, etc.)?*

# Pick-Up

The pick-up time will be between 5:00-5:30 pm each day. Bus riders will leave Keystone at 5:10 pm each day. Please mark the ONE that applies and then initial your consent to the manner in which your student will be picked up. Pick-Up will take place at the old Daly main entrance on the South side of the building.

*I understand that my student will be a bus rider to this address:*  *.*

Initial:

*I understand that I will pick up my student between 5:00-5:30 pm.*

Initial:

*I understand that my student will walk home at 5:30 pm.*

Initial:

**Repetitive tardiness in pick-up can result in removal from the program.**

# Parent Permission Form

As the parent or legal guardian of , I hereby give permission for my child to participate in the Keystone Program sponsored by the Hamilton School District. In consideration of the district’s agreement to allow my child to participate in the referenced program, I agree to accept responsibility for any loss, damage, or injury to my child that occurs during my child’s participation in this program that is not the result of fraud, willful injury to a person or property or the willful or negligent violation of a law by a trustee, employee or agent of the Keystone Program. *By signing below, I am stating that I have read and understood the above.*

Signature Date

## Medical Release

I hereby authorize the staff of the Keystone Program volunteers, coaches, trainers, supervisors, instructors and drivers as my agents, to consent to medical, surgical or dental examination and/or treatment. In case of emergency, I hereby authorize treatment and/or care at any hospital or by licensed medical personnel. Staff will NOT medicate children. Parents/guardians are ENTIRELY responsible for medications and for personally arranging for or ensuring the proper and timely medicating of their child.

Initial:

## Transportation

I hereby give my child permission to travel in school district busses or vehicles for field trips. Initial:

## Data Release

The Keystone Program receives funding through federal grants. To fulfill the requirements of that grant, it is necessary for information to be provided to the Montana Office of Public Instruction through a secure website. This information is used to track the effectiveness of the Program. Information required by OPI includes student name, grade level, ethnicity and teacher, after-school program attendance records, academic achievement, student enrollment in the Free/Reduced Lunch Program. I hereby authorize for this information to be posted on the secure OPI website for the purposes of grant management.

Initial:

## Picture Release

For internal and external use, I acknowledge that the Keystone Program and/or its sponsors may utilize film, print, and digital images of a student or a family, which may be taken during involvement in program activities. I consent to such uses & hereby waive all rights to compensation.

Initial:

# Parent Contract

I understand the following things about my child’s participation in the Keystone Program:

## It is a privilege for my child to participate in the Keystone Program and not a requirement. If my child’s behavior becomes disruptive or destructive, I realize that they may no longer be allowed to participate.

* If I am going to be late in picking my child up I will contact the program to make arrangements. I understand that I may be charged at an hourly rate if I am habitually or excessively late. **I understand that my child may be asked to take a break or may be removed from the program if I am habitually or excessively late.**
* I understand that the program staff will be taking the children outdoors and on field trips as much as possible. If I need to pick my child up earlier than the normal time I will call in advance to arrange for my child.
* Knowing that the program staff is going to be engaging my child in as many activities as possible, I will send him or her with lunch and snacks. I also will send my child in clothing that is comfortable and appropriate for the weather.
* If I have concerns or questions about the program, I know that I can contact program staff.

Parent Signature Date

# Student Contract

***Please read the following contract with your child and have them sign it so we know they understand!***

I understand that participating in the Keystone Program is a privilege. Even though it is not exactly the same as being in my classroom at school, I know that I have to show the same good behavior. I understand that while at Keystone I need to have respect in three main areas:

* Respect for the teachers: this means that I have to listen while they are talking, follow their directions the first time I am asked, and look for ways that I can help.
* Respect for each other: this means that I am going to be kind to the other students at the program, thinking about how my words or actions might hurt others or make it less fun for them to be at Keystone.
* Respect for the space: I know that we are very lucky to get to have our program in the school and I know how hard the custodians have to work to keep it clean. So I will do everything I can to make their job easier. I also know that we will be out on field trips a lot and it will be very important for me to listen to the instructions of the teacher so that I can treat those spaces with respect.

## I know that if my behavior hurts the other students or keeps them from having a good time at Keystone, I will not be allowed to come anymore. So I will talk with the teachers if I have problems and let the teachers help me fix them. I will come to the program every day with my best attitude, ready to have fun and learn!

 Student Signature Date