



# Apple Tree

COMMUNITY FOCUSED LEARNING  
www.exploreappletree.com  
541-272-5141

## Youth Membership Application

I am applying for the following program(s):

- Afterschool (3:30 - 5:30, MTTF)
- Unschool Wednesday (7:30-5:30, W)
- Homeschool/Online School (9:00-3:30 MTWTF)
- Summer Programs (8:30 - 5:30, MTTF)
  - Early Drop Off (7:30, Will be offered if needed.)

Requested Start Date: \_\_\_\_\_

### Youth Information

Name		Age	DOB
Street Address		Family or Friends at Apple Tree (list)	
City ST ZIP Code			<input type="checkbox"/> Group with
Youth's personal:			<input type="checkbox"/> Group with
Cell Phone			<input type="checkbox"/> Group with
E-Mail Address			<input type="checkbox"/> Group with

### Parent/Guardian Information

	Parent/Guardian 1 (Primary Contact)	Parent/Guardian 2
Name		
Youth lives with?		
Phone		
Email		
Contact method	<input type="checkbox"/> Phone <input type="checkbox"/> Text <input type="checkbox"/> Messenger <input type="checkbox"/> Email	<input type="checkbox"/> Phone <input type="checkbox"/> Text <input type="checkbox"/> Messenger <input type="checkbox"/> Email
Employer*		
Duties		
Job contact Info		

\*for ERDC

Updated 6/4/21 JK/PL

### Pickup Information

People in addition to Parent/Guardian authorized to pick up your child:

Name	Phone Number	Relationship

### Arrival/Departure Schedule

My child will be arriving by:

- Bus
- Parent drop-off
- Walking

Please indicate which days your child will be attending.

	Monday	Tuesday	Wednesday	Thursday	Friday
Arrival Time					
Departure Time					

### School Information

School	Grade
Teacher	
Special Considerations (IEP, ADHD, 504, etc)	

### Homeschool Information

How would you like Apple Tree to contribute to your child's homeschooling?

## Additional services

Many kids with IEPs, 504s, or behavioral challenges find their needs are met by the environment and culture at Apple Tree. Others may do better with additional attention. We can provide some services to accommodate their needs. If this is a consideration for your child please describe your concerns. If you want one-on-one help with homework or other assignments, note that here. DHS/ERDC may provide additional payments for these services. We can also schedule a confidential discussion.

Comments:

## Interests

<input type="checkbox"/> Critter Care	<input type="checkbox"/> Food Arts & Meal Prep
<input type="checkbox"/> Theater & Acting	<input type="checkbox"/> Science & Technology
<input type="checkbox"/> Arts & Crafts	<input type="checkbox"/> Building Social Skills
<input type="checkbox"/> Music & Movement	<input type="checkbox"/> Nature Exploration
<input type="checkbox"/> Tutoring	<input type="checkbox"/> Table Top, Strategy, & Board Games
<input type="checkbox"/> Environment	<input type="checkbox"/> Volunteer & Community Engagement

## Computers

Kids are spending a lot of screen time in classes. When they aren't in class or doing homework we encourage them to do non-screen activities like art, board games, or critter care. We also have computer-related activities available including drawing programs, 3D printing, and Lego robotics. In addition, they are sometimes allowed 30 minutes per day for recreational computer gaming on Apple Tree computers. Roblox and Minecraft are the most popular. Often they play Roblox cooperatively. This provides them a recreational release. They also learn responsibility, sharing, and self-discipline. If you have concerns, please let us know.

Comments:

## Covid-19

During the pandemic, Apple Tree adheres to all safety requirements set by the State of Oregon and the Oregon Health Association for the protection of our members and staff. This includes wearing masks, hand-washing, social distancing, enhanced air filtration, and rigorous cleaning and disinfecting.

## Emergency Contact Information and Permissions for:

Member Name:

### Media Release

I hereby grant permission to record my child's/ward's likeness and/or voice for use by television, films, radio, social media, and on-line or printed materials related to Apple Tree Community Center.

Yes  No (initial) \_\_\_\_\_

### Apple Tree Neighborhood Activities Permission Slip

I give my child permission to go on walking field trips with the program assistants at Apple Tree. Walking field trips will happen weather permitting.

Yes  No (initial) \_\_\_\_\_

### Food and Environmental Sensitivities or Allergies

Does your child have any food or other allergies we need to know about?

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### Medical Information and Release

Physician's Name		Phone
Insurance		Policy #

In the event that I can't be reached in an emergency I hereby give my permission for employees of Apple Tree Community Center to secure proper medical care for my child as deemed necessary. This permission extends from minor first aid treatment to doctor-ordered hospitalization, injections, anesthesia, and other medical procedures.

Name (printed)		Phone
Signature		Date

### Emergency Contact Information

Name	Phone Number	Relationship

### Agreement and Signature

The undersigned(s), being the lawful parent(s) and/or guardian(s) of the above child, hereby consent to the participation by your child in all activities conducted by Apple Tree. By submitting this application, I affirm that the facts set forth in it are true and complete. I agree to take responsibility for my actions and the actions of my children with regard to people and property at Apple Tree.

Name (printed)		
Signature		Date

*Thank you for completing this application form and for your interest in Apple Tree!*