AFTER Program Policies & Procedures

Our AFTER program welcomes people of all abilities to participate. Experienced staff will work with individuals and families to understand the needs of each participant and develop safe and effective adaptations, as needed. We will make every effort to make participation a success!

AGES, RATIOS & CLASS SIZE:
Ages, ratios and class size vary by activity. Participants requiring individual care are welcome to attend with their caregiver but we are unable to provide 1:1 support. We are happy to assist in identifying staff from our agency network to provide this 1:1 support, however, private payment arrangements will need to be made by the participant or their family.

INTAKE PROCESS:
All participants MUST complete an Initial Intake Form and Emergency Fact Sheet, and sign the Policies and Procedures before attending our programs. Emergency Fact Sheets need to be updated every 2 years.

Initial Intake Form (link)

Emergency Fact Sheet (link)

REGISTRATION & PAYMENT:
Due to limited space in activities, registration is due prior to the activity. Payments are accepted by check or cash, in person or via mail, and by credit card through online registration at thearcofghn.org

WAITING LISTS:
If your activity of choice is full, you will automatically be placed on the waiting list without payment. The AFTER Coordinator will contact those on the waiting list, in order of placement, should an opening occur. Being placed on the waiting list does not guarantee enrollment into an activity.

REFUNDS/CANCELLATIONS:
You must notify The Arc of GHN at least two (2) days in advance of your cancellation for weekly activities to receive a refund.

Refunds will not be granted for special events requiring advance purchase of tickets unless a replacement is found. Credit or refunds will be granted if the AFTER program changes the location, time, or date of an activity, prohibiting attendance, or if the activity is canceled due to insufficient registration. We will do our best to provide at least two (2) days’ notice if
there has been a cancellation, except in cases of inclement weather. Credit or refunds will be granted if AFTER cancels an activity.

**ATTENDANCE:**
Once registered, please make every effort to attend the activity; space is limited and staffing and/or materials are dependent upon the number of registered participants.

Please note the start and finish times of each program and plan accordingly. Participants may arrive/be dropped off 10 minutes prior to the start time and leave/be picked up 10 minutes after the end time, due to limits on staff availability. NO participant can be dropped off at an activity without that activity leader present.

**SAFETY:**
The intention of the AFTER program is to ensure that all participants have a fun and relaxing experience. We understand that, on occasion, people may struggle with increased emotionality or difficulty in managing their behavior. While our staff are trained to provide support, it may be necessary to ask the person to go home or be picked up, so that they can attend to their needs. All participants will be welcomed back to any activity with the understanding that safe behavior is maintained.

**MEDICAL EMERGENCIES:**
AFTER staff are trained in CPR and we are committed to ensuring the appropriate care in a medical emergency, including calling 911, if necessary. By signing this document you are authorizing the organizers to take whatever measures are necessary and which it deems advisable to protect the health and wellbeing of myself/the person for whom I am the guardian, which includes but is not limited to first aid, ambulance transport, and/or hospitalization.

If the participant has a specific medical protocol to be followed, such as a seizure protocol, then this information MUST be shared with the program staff prior to an activity.

**DISCLAIMER:**
I for myself or for the person for whom I am guardian, waive and release any and all claims for damages I may have against the sponsors, organizers and any individuals associated with the event, their successors and assigns and will hold them harmless for any and all injuries suffered in connection with the AFTER Program. I have read and agree with the AFTER Program Policies & Procedures.

Participant, guardian, parent signature: ____________________________ Date:_________

Program schedules, fees, staff, policies and procedures are subject to change without notice.

**QUESTIONS? CONCERNS? FEEDBACK?**
Please contact our AFTER Program Coordinator, Kim Bachman at 978-373-0552 ext. 208

Updated 9/12/2017