



TOWN OF WEST SENECA

LAUREN J. MASSET
RECREATION SUPERVISOR

TOWN SUPERVISOR
GARY DICKSON
TOWN COUNCIL
ROBERT BREIDENSTEIN
JOSEPH CANTAFIO
SUSAN KIMS
JEFFREY PIEKAREC

TO: Honorable Town Board / Town of West Seneca

FROM: Lauren J. Masset
Recreation Supervisor

DATE: April 18, 2022

RE: Youth Open Gym Program – Spring 2022

Please approve the attached Youth Open Gym Program for Spring 2022.

This program is contingent upon proper staffing levels and gym availability.

Program Info	Fee Adjustments	Expense Groups
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Start Date: End Date:

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Program Info

Youth Open Gym Spring 2022
2022 Youth Open Gym Spring

When:
Ages 5 years, 0 months - 8 years, 11 months from 5:50 - 6:50 PM
Ages 9 years, 0 months - 13 years, 11 months from 7:00 - 8:00 PM

Must be the age by the first date of the program to enroll.

Where:
CCL Youth Gym / 1300 Union Road

Cost:
FREE for RESIDENTS but SPACE IS LIMITED and PRE-REGISTRATION IS REQUIRED. A resident is any person who resides at an address that pays Town of West Seneca property taxes.

Details:
Join us for YOUTH OPEN GYM! This program is highly active. Activities will be indoor. Activities will include a variety of "GYM CLASS" games. The program is limited to 20 youth per session and pre-registration is required (no walk-ins). Parents/Guardians must both walk their child in/out and sign their child in/out of the program. Youth are required to bring a water bottle to each session. If the West Seneca Central School District cancels school (full day or partial day) and/or after-school activities are canceled this program is also canceled for that day. Registration is online only

Program dates and themes are TBD based on CCL Youth Gym and Staff availability. These dates/theme lists will be updated on a regular basis. The program will run in April and May 2022. Registration dates will be determined by program dates. Registration will close at least 1 business day before the program start date.

Children at Risk:
All childcare agencies are required by law to report suspected child abuse or maltreatment if they have reasonable cause to suspect it. Our staff is trained in recognizing abuse and maltreatment. Maltreatment can be such things as failing to provide proper medical care, excessive punishment, misuse of alcohol, drugs, etc.

We will also report any threats of violence or harm a youth makes towards themselves or someone else to the proper authorities.

We will also report any statements youth make regarding violence (physical, mental, emotional, verbal, etc) towards them and/or regarding any other members of their household to the West Seneca Police Department.

Any youth who brings over the counter, prescribed, illegal and/or any other types of drugs, alcohol and/or weapons to the program will be reported to the West Seneca Police Department.

The Town of West Seneca reserves the right to contact the West Seneca Police Department regarding any situation, at any time, for any reason. Parents may or may not be notified.

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Last Modified on 4/18/2022 1:05:18 PM by Lauren Masset | Created on 4/14/2022 2:44:45 PM by Lauren Masset

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The registrant and parent/guardian (where applicable) agrees to all disclaimers.
Disclaimer 1 of 1

2022 Spring Youth Open Gym

2022 Youth Open Gym Spring Enrollment Form

When:

Ages 5 years, 0 months - 8 years, 11 months from 5:50 - 6:50 PM
Ages 9 years, 0 months - 13 years, 11 months from 7:00 - 8:00 PM

Must be the age by the first date of the program to enroll.

Where:

CCL Youth Gym / 1300 Union Road

Cost:

FREE for RESIDENTS but SPACE IS LIMITED and PRE-REGISTRATION IS REQUIRED.

Details:

Join us for YOUTH OPEN GYM! This program is highly active. Activities will be indoor. Activities will include a variety of "GYM CLASS" games. The program is limited to 20 youth per session and pre-registration is required (no walk-ins). Parents/Guardians must both walk their child in/out and sign their child in/out of the program. Youth are required to bring a water bottle to each session. If the West Seneca Central School District cancels school (full day or partial day) and/or after-school activities are canceled this program is also canceled for that day.

Games are subject to change at any time with no notice.

Youth Open Gym Waiver

Waivers:

By signing below, you acknowledge that you have read, understand, and agree to all policies and waivers listed below.

I understand, agree, and accept the below for myself, my spouse, my children, my minor(s), any other member named on my recreation account (minor or adult), and/or any guests (of any age) that myself and/or anyone named on my recreation account brings to a Town of West Seneca facility, event, activity, program, etc.

Participant Release & Waiver of Liability and Indemnity Agreement

PLEASE READ CAREFULLY. THIS DOCUMENT AFFECTS YOUR LEGAL RIGHTS AND IS LEGALLY BINDING. BY SIGNING THIS AGREEMENT, YOU ARE RELEASING THE TOWN OF WEST SENECA FROM ALL LIABILITY AND FOREVER WAIVING ANY AND ALL CLAIMS AGAINST THE TOWN OF WEST SENECA.

PARENT PERMISSION TO TAKE PICTURES AND VIDEO FOOTAGE:

I hereby irrevocably consent to and authorize the use and reproduction by the Town of West Seneca, or anyone authorized by the Town of West Seneca, of any and all photographs/videos taken of myself, my spouse, my children, my minor(s), any other member named on my recreation account (minor or adult), and/or any guests (of any age) that myself and/or anyone named on my account brings to a Town of West Seneca facility, event, activity, program, etc., negative or positive, for any purpose whatsoever without compensation to me. All negatives and positives, together with the print, shall constitute the Town of West Seneca's property, solely and completely. I understand these photos/videos will be used in print publications, media publications, websites, social media accounts, and other outlets. Photos/videos will be used by the Town of West Seneca (TWS) for any/all purposes deemed fit including but not limited to posted online, social media, local news outlets, etc. Any person who is not permitted to have their photo/video taken will have to sit out of activities/events/etc. where photos/videos are being taken. No refunds will be issued.

Hand Sanitizer

I understand that due to COVID-19 and other health/safety reasons hand sanitizer will be available for all staff and youth. I give my child permission to use all provided hand sanitizer. If my child has an allergy to hand sanitizer or any of the ingredients, I understand that I need to note on their registration form under allergies. I understand if I do not want

my child to use hand sanitizer, I must note that at time of registration on the registration form.

Program Hours

Schedule for Ages 5-8:

5:50 - 6:00 PM Drop Off. Parents must walk their children in and sign them in. Youth not in attendance at 6:05 PM will be marked absent and not able to attend the program. Gym doors close at this time and parents/guardians are not permitted in the gym during the class. Location CCL Youth Gym.

6:00 - 6:40 PM - Program activities

6:40 - 6:50 PM - Pick-Up. Adults must walk their child in, be on the approved pick up list (provided at the time of registration), and show their photo-ID before a child can be released to them. Gym door opens at 6:40 PM for pick up. Location CCL Youth Gym.

(5:50 - 6:50 PM)

Schedule for Ages 9-13:

7:00 - 7:10 PM Drop Off. Parents must walk their children in and sign them in. Youth not in attendance at 7:15 PM will be marked absent and not able to attend the program. Gym doors close at this time and parents/guardians are not permitted in the gym during the class. Location CCL Youth Gym.

7:10 - 7:50 PM - Program activities

7:50 - 8:00 PM - Pick-Up. Adults must walk their child in, be on the approved pick up list (provided at the time of registration), and show their photo-ID before a child can be released to them. Gym door opens at 7:50 PM for pick up. Location CCL Youth Gym.

(7:00 - 8:00)

Drop Off

Drop Off for Ages 5-8: I understand that I must walk my child into the program and sign them in. I understand that they must arrive between **5:50 - 6:00 PM** otherwise they may not be permitted to attend the program that day and will be marked absent. Drop off is located inside the Community Center and Library in the Youth Gym.

Drop Off for Ages 9-13: I understand that I must walk my child into the program and sign them in. I understand that they must arrive between **7:00 - 7:10** otherwise they may not be permitted to attend the program that day and will be marked absent. Drop off is located inside the Community Center and Library in the Youth Gym.

Pick Up

Pick Up Ages 5-8: I understand that I must walk into the program, show my photo ID and sign my child out. Any person not on the approved pick up list and/or who does not have a photo ID my child will not be released to. I understand that I must pick up my child between **6:40 - 6:50 PM**, if my child is not picked up they will not be permitted to attend the program for the rest of the season and my child may be turned over to the West Seneca Police. Pick up is located inside the Community Center and Library in the Youth Gym.

Pick Up Ages 9-13: I understand that I must walk into the program, show my photo ID and sign my child out. Any person not on the approved pick-up list and/or who does not have a photo ID my child will not be released to. I understand that I must pick up my child between **7:50 - 8:00 PM**, if my child is not picked up they will not be permitted to attend the program for the rest of the season and my child may be turned over to the West Seneca Police. Pick up is located inside the Community Center and Library in the Youth Gym.

Required Approved Pick Up List/Emergency Contacts:

At time of registration: The approved pick up list and emergency contact list are the same. Please list the **FIRST AND LAST** names of any person who will be picking up your child/ Emergency contacts. Photo ID is required at time of pick up. If a name is not listed and/or the person does not have the proper photo ID at time of pick up, the child will not be released. In the event of an emergency or no-pick up, the emergency contact will be contacted if the parent/guardian is not able to be reached within 10 minutes. Please include the first name, last name and phone number. I give

permission for my child to be released to any person on the approved pick up list/emergency contact list provided at time of registration.

Veterans Park Use

I understand that this program takes place inside the Community Center and Library Youth Gym. The program could also use all amenities in Veterans Park (ball diamonds, basketball court, grassy areas, bandshell, shelters, playground, Splash Pad, pool, Veterans Walk-Way, library, Legion Post 735, Town Hall, WSPD Station and all other areas of the Veterans Park Complex and Community Center and Library).

Sunscreen / Bug Spray

I understand that the Town of West Seneca cannot apply sunscreen, bug spray or anything else to my child. The Town of West Seneca highly suggests applying sunscreen and bug spray before my child attends an outdoor the program.

Food/Drink

I understand that the Town of West Seneca Recreation Department and/or On-Site Guests/Trips may provide food and drink to my child. It is unknown if the food/drink contains any allergens, gluten, etc. The program will not be sending home ingredient lists. You must "opt" into this at time of registration. Youth with known allergies and/or dietary restrictions must be marked NO. These youth will not be provided with the food/drink items.

Required Information

I understand that this is required information at time of registration. Does your child have any allergies, serious fears, specific needs, disabilities, chronic illness, behavioral issues, emotional needs, etc. of any kind? Are there any other issues, circumstances or situations that we should be aware of? In the event the Town of West Seneca is not notified of this during the registration process, the child may not be permitted to attend the Town of West Seneca program. This information assists us in planning the program and ensuring that it is fun and safe for all. This information must be included on the registration form.

Personal and Required Items

I understand my child will not be permitted into the program if they do not have a water bottle, socks and sneakers.

I understand that my child must bring a water bottle labeled with their first and last name everyday. I understand that my child must be wearing socks and sneakers on their feet. If my child does not have a water bottle and/or is missing socks and/or sneakers they will not be allowed to stay at the program.

I understand that my child and their clothes could get messy, wet and/or dirty during the program. I understand that my child is not permitted to bring any items from home except for their water bottle (unless otherwise asked). I understand that the Town of West Seneca is not responsible for any personal property that is lost or damaged. Further, cell phones and other mobile devices are not permitted.

All items must be labeled with the child's first and last name. Further, youth are not permitted to bring any additional items from home.

I understand the Town of West Seneca is not responsible for any lost, misplaced, damaged, broken or stolen items.

Character Pledge

Character Pledge: I UNDERSTAND THAT MY CHILD, MYSELF, MY HOUSEHOLD MEMBERS MUST SHOW RESPECT TOWARDS OTHERS, IS RESPONSIBLE FOR HIS/HERS ACTIONS, WILL NOT CAUSE HARM TO ANY PERSON, WILL NOT THREATEN ANY PERSON, MUST SHOW TOLERANCE OF THE DIFFERENCES AMONG US, HAVE DIGNITY BY PROMOTING AN ENVIRONMENT FREE FROM HARASSMENT, DISCRIMINATION, BULLYING, ETC. I UNDERSTAND MY CHILD/MYSELF/MY HOUSEHOLD MEMBERS MUST DEMONSTRATE A CONDUCT THAT FOSTERS CIVILITY, KINDNESS AND ACCEPTANCE. I UNDERSTAND THAT IF MY CHILD/MYSELF/MEMBERS OF MY HOUSEHOLD DOES NOT FOLLOW THE CHARACTER PLEDGE OR FOLLOW PROGRAM RULES THE PROGRAM PARTICIPANT COULD BE EJECTED FROM THE PROGRAM WITHOUT WARNING, A REFUND WILL NOT BE ISSUED FOR THE CURRENT OR FUTURE SESSIONS AND ANYONE FROM MY HOUSEHOLD WILL NOT BE PERMITTED TO ENROLL IN PROGRAMS FOR ONE YEAR. I UNDERSTAND THAT I MUST REVIEW THE CHARACTER PLEDGE WITH MY CHILD/MYSELF/MY HOUSEHOLD MEMBERS.

PARENT/GUARDIAN AGREEMENT

I HEREBY ENROLL MY CHILD IN THE TOWN OF WEST SENECA RECREATION DEPARTMENT PROGRAM. I HAVE READ AND AGREE TO ALL TERMS IN THIS APPLICATION. THE HEALTH INFORMATION FORM IS CORRECT AS FAR AS I KNOW AND

THE PERSON DESCRIBED HAS PERMISSION TO ENGAGE IN ALL ACTIVITIES EXCEPT AS NOTED BY ME AND HIS OR HER PHYSICAL/HEALTHCARE PROVIDER. I HAVE PROVIDED THE STAFF WITH ANY PERTINENT INFORMATION WHICH MAY ASSIST THE TOWN OF WEST SENECA RECREATION DEPARTMENT IN CARING FOR MY CHILD, INCLUDING, BUT NOT LIMITED TO: ALLERGIES, PREVIOUS OR EXISTING ILLNESS OR CONDITION, SUNBURN SENSITIVITY, DIET REQUIREMENTS, LONG-TERM MEDICATIONS, DISABILITY OR LIMITING CONDITIONS, EMOTIONAL, DEVELOPMENTAL, OR BEHAVIORAL CHALLENGES. I AGREE TO NOTIFY THE TOWN OF WEST SENECA RECREATION STAFF IMMEDIATELY IN WRITING OF ANY CHANGES IN ADDRESS, PHONE NUMBERS, EMERGENCY CONTACTS, ETC. I UNDERSTAND THAT NOT PROVIDING THE ABOVE MAY PUT MY CHILD'S HEALTH AND SAFETY AT RISK. I GIVE CONSENT FOR THE TOWN OF WEST SENECA RECREATION STAFF TO MONITOR MY CHILD APPLY THEMSELVES WITH SUNSCREEN. I UNDERSTAND WEST SENECA YOUTH & RECREATION STAFF WILL NOT APPLY SUNSCREEN TO MY CHILD AT ANYTIME. I UNDERSTAND I MUST APPLY SUNSCREEN TO MY CHILD BEFORE THEY ARRIVE AT THE PROGRAM AND THAT MY CHILD CAN APPLY SUNSCREEN TO THEMSELVES AT THE PROGRAM. IF MY CHILD HAS ANY ALLERGIES TO SUNSCREEN, I HAVE SO INDICATED IN THE "MEDICAL RECOMMENDATIONS AND RESTRICTIONS WHILE AT THE PROGRAM" SECTION OF THE APPLICATION. I GIVE CONSENT FOR MY CHILD TO TAKE PART IN FIELD TRIPS OR EXCURSIONS OFF PROPERTY UNDER PROPER SUPERVISION. I GIVE THE TOWN OF WEST SENECA RECREATION DEPARTMENT CONSENT TO USE ANY PHOTOGRAPHS OR VIDEO TAPES OF MY CHILD FOR PROMOTIONAL OR PUBLIC RELATIONS PURPOSES, INCLUDING WEB SITE MATERIAL AND THE PROGRAM ADVERTISING. ALTHOUGH THE ACTIVITIES OF THE THE PROGRAM WILL BE SUPERVISED AT ALL TIMES, IT IS AGREED AND UNDERSTOOD THAT NEITHER THE TOWN OF WEST SENECA NOR ANY INDIVIDUAL ASSOCIATED THEREWITH WILL SUFFER ANY LIABILITY FOR INJURIES OR DAMAGES SUSTAINED BY MYSELF OR MY CHILD ARISING OUT OF SUCH ACTIVITIES, AND I AGREE TO INDEMNIFY AND HOLD HARMLESS THE TOWN OF WEST SENECA AND SUCH INDIVIDUALS SUPERVISING, AIDING AND OTHERWISE ASSOCIATED WITH THE THE PROGRAM AND ITS ACTIVITIES FROM ALL DAMAGES AND LIABILITIES, INCLUDING, BUT NOT LIMITED TO, PERSONAL INJURIES, SUFFERED OR INCURRED WHILE PARTICIPATING IN THE PROGRAM ACTIVITIES. I HEREBY REGISTER MY CHILD FOR THE DESIGNATED SESSION(S) OF THE TOWN OF WEST SENECA RECREATION DEPARTMENT PROGRAM.

Program

In registering for this program, I attest that my child is at a level of fitness necessary to participate in the program and assume the responsibility of having my child's physical condition evaluated if any questions exist. I understand that the Town does not carry insurance to cover any medical bills that result from participating in any recreation program(s). I give my full permission for such first aid as is deemed necessary to be provided to my child on the premises or prior to transport to a hospital for further treatment. I am aware of the Recreation Department's policies regarding emergencies, refunds, program cancellations, and program changes. I have read, understand, and agree with the preceding statement. This health history is correct so far as I know, and the person I am enrolling has permission to engage in all prescribed activities except as noted. In the event I cannot be reached in an emergency, I hereby give permission to the Town of West Seneca to hospitalize, secure proper treatment for, and to order injections and/or anesthesia and/or surgery for the person named above. I expect to be notified immediately.

I understand that the Town of West Seneca reserves the right to call 911 for any reason, at any time, for any program participant or patron.

I understand, agree, and accept the below for myself, my spouse, my children, my minor(s), any other member named on my recreation account (minor or adult), and/or any guests (of any age) that myself and/or anyone named on my recreation account brings to a Town of West Seneca facility, event, activity, program, etc.

Assumption of Risk

I, in my legal capacity as myself, my spouse, my children, my minor(s), any other member named on my recreation account (minor or adult), and/or any guests (of any age) that myself and/or anyone named on my account brings to a Town of West Seneca facility, event, activity, program, etc., acknowledge and agree that any use of the Town of West Seneca facilities, services, equipment and premises ("Facilities") and any participation in Town of West Seneca programs and activities ("Programs") comes with inherent risks including, but in no way limited to: (1) moderate and severe personal injury, (2) property damage, (3) disability, (4) death, and/or (5) sickness or disease, and (6) loss or theft of personal property. I acknowledge that there is a COVID-19 public health emergency and that I must take personal precautions by complying with public health mandates to help protect against the spread of COVID-19 when using the Town of West Seneca Facilities and when participating in said Programs. I further acknowledge that this assumption of risk is applicable to any COVID-19 exposure or infection related to use of the Town of West Seneca Facilities and participation in said Programs. I voluntarily, for myself, my spouse, my children, my minor(s), any other member named on my recreation account (minor or adult), and/or any guests (of any age) that myself and/or anyone named on my account brings to a Town of West Seneca facility, event, activity, program, etc., accept and assume full responsibility

for these risks, as well as any and all other risks of the use of Facilities and participation in Programs. I agree that I have full knowledge of the nature and extent of all such risks and am not relying on all such risks being described in this document.

Waiver, Release, Indemnification & Covenant Not to Sue

I, agree on behalf of myself, my spouse, my children, my minor(s), any other member named on my recreation account (minor or adult), and/or any guests (of any age) that myself and/or anyone named on my account brings to a Town of West Seneca facility, event, activity, program, etc., that the Town of West Seneca, its officers, directors, agents, employees, volunteers, insurers and representatives ("Releasees") will not be liable for any personal injury, property damage, disability, death, sickness or disease incurred by any person named on my account, including any minor, however occurring including, but not limited to, the negligence of Releasees. I understand that all persons named on my account and their guest(s), including any minor, will be solely responsible for any loss or damage, including personal injury, property damage, disability, death, sickness or disease sustained from the use of Facilities and participation in Programs. I, on behalf of those individuals named on my account and any guests brought by said persons: 1) HEREBY RELEASE, WAIVE AND COVENANT NOT TO SUE the Town of West Seneca for any causes of action, claims, suits, liabilities or demands of any nature whatsoever including, but in no way limited to, claims of negligence, personal injury, property damage, loss or theft of personal property, disability, death, sickness, disease or accident of any kind, arising out of or in any way related to the use of Facilities or participation in Programs, and give up any claim seeking damages, whether that participation is supervised or unsupervised, however the injury or damage occurs. and 2) INDEMNIFY AND HOLD HARMLESS Releasees from any and all causes of action, claims, demands, losses, suits, liabilities or costs of any nature whatsoever, including claims of negligence, arising out of or in any way related to the use of Facilities and participation in Programs. I specifically acknowledge the contagious nature of COVID-19 and that this waiver, release, indemnification, and covenant not to sue are applicable to any COVID-19 exposure or infection related to use of the Town of West Seneca Facilities and participation in said Programs

Health

I understand that I am required to list any and all health issues which include physical, mental, specific needs, allergies, etc., for each person on my account and during the registration process. I understand that if a program participant attends a program and the Town of West Seneca becomes aware that they were not informed of any physical, mental, specific needs, allergies, etc., at the time of registration, the program participant will not be allowed to stay at the program and no refund will be issued.

I understand the Town of West Seneca cannot administer medicine to any adult or child, including, but not limited to, sunscreen. I understand no medicine for any youth or adult is allowed at any Town of West Seneca program unless discussed with the Town of West Seneca first. I understand that I must contact the Town of West Seneca to discuss this.

I agree to list each person on my account health history correctly and update my account as the information changes. I agree that I, all persons on my account, and guests have permission to engage in recreational activities. I understand the Town of West Seneca reserves the right to contact 9-1-1 at any time, for any health issue, illness, or injury for any program participant without notifying parents, guardians, spouses, emergency contacts, etc. I understand that the Town of West Seneca will attempt the contact the injured or ill persons - parents, guardians, spouses, emergency contacts after calling 9-1-1. I hereby give permission for 9-1-1 services to take custody of the person and/or care.

I understand that if myself, my spouse, my children, my minor(s), any other member named on my recreation account (minor or adult), and/or any guests (of any age) that myself and/or anyone named on my account brings to a Town of West Seneca facility, event, activity, program, etc., does not have updated immunizations that I am obligated to notify the Town of West Seneca at time of registration for any program or facility.

COVID-19

I, on behalf of myself, my spouse, my children, my minor(s), any other member named on my recreation account (minor or adult), and/or any guests (of any age) that myself and/or anyone named on my account brings to a Town of West Seneca facility, event, activity, program, etc.:

I acknowledge that the novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization and is reported to be extremely contagious.

I acknowledge it is our sole responsibility to pre-screen ourselves within one hour prior to entering the Town's Facilities or participating in a Town Program. The screen must include answering the following questions:

1. Have you, your child and/or any member of your household experienced any of the following symptoms in the past 48 hours:
 1. Fever or Chills
 2. Cough
 3. Shortness of breath or difficulty breathing
 4. Fatigue
 5. Muscle or body aches
 6. Headache
 7. New loss of taste or smell
 8. Sore throat
 9. Congestion or runny nose
 10. Nausea or Vomiting
 11. Diarrhea
2. Within the past 14 days, have you, your child and/or any member of your household been in close physical contact (6 feet or closer for at least 15 minutes) with a person who is known to have laboratory-confirmed COVID-19 or with anyone who has any symptoms consistent with COVID 19?
3. Are you, your child or any member of your household isolating or quarantining because you may have been exposed to a person with COVID-19 or are worried that you may be sick with COVID-19?
4. Are you, your child or any member of your household currently waiting on results of a COVID-19 test?
5. Within the past 14 days, have you, your child or any member of your household traveled internationally or returned from a state identified by New York state as having widespread community transmission of COVID-19 (other than just passing through the restricted state for less than 24 hours)?

I agree that if any of the answers to the questions in numbers 1-5 above are "yes" then the program participant will not enter the Town's Facilities or participate in the Town's Programs until such time as the person obtains a medical evaluation and are approved by the medical provider to enter the Town's Facilities or participate in the Town's Programs. In most cases the program participant will not be able to return for 10 days and will require a negative COVID-19 test.

I agree to adhere to all guidelines and rules of the Centers for Disease Control and Prevention (CDC), New York State Department of Health, Erie County Department of Health, and Town of West Seneca, if applicable, as it relates to wearing masks and social distancing.

I understand that the failure to abide by this above result in myself, my child, a member of my household, the program participant being asked to leave the Town's Facilities or being denied entry to the Town's Facilities or Programs. In this event, no refund will be issued.

I understand that my child cannot attend the program IF in the past 10 days - they or anyone in their household: has been exposed to COVID-19, tested positive for COVID-19, are or were experiencing COVID-19 symptoms, traveled to an area of high transmission, are pending a COVID-19 test (more details above). I understand that I must pre-screen my child everyday before dropping them off. If any of these conditions apply during the screen, my child cannot attend the program for 10 days.

Further, I understand if my child or anyone in my household tests positive for COVID-19 I must notify the Town of West Seneca within one business day.

Cancellations

I understand the Town of West Seneca reserves the right to cancel any program (session, date, time, activity, trip, on-site guest, etc.) at any time, without notice, for any reason and that the program (session, date, time, activity, trip, etc.) is not required to be rescheduled.

I understand that due to any factors related to COVID-19, weather, staffing, illness, facility issues, NYSDOH/ECDOH, any other factors, etc. this program could be canceled or suspended for any length of time, at any time, with no notice, including day of the program or during the program. I understand that I could not find this out until I arrived at the program. If the program is canceled youth (no parent guardian on-site) will not be permitted to stay and could be turned away at the door and/or youth of parents will need to pick them up within 10 minutes. If the program is canceled, adults and youth (with a parent guardian on-site) will not be permitted to stay and could be turned away at the door and/or parents/adults/youth will need to leave immediately. Failure to follow this policy could result in your household account being suspended and members of your account not being permitted to attend a recreational activity or program for 12 months. No refunds will be issued on any payments.

I understand that the program will be moved INSIDE only due to weather conditions (rain, high heat, etc) and that on-site guests who require the use of outdoors will be canceled and not rescheduled.

Facility and Program Rules

I understand that myself, my spouse, my children, my minor(s), any other member named on my recreation account (minor or adult), and/or any guests (of any age) that myself and/or anyone named on my account brings to a Town of West Seneca facility, event, activity, program, etc., are required to follow any and all Town of West Seneca Facility and/or Program rules. Failure to do so will result in ejection from the program or facility.

I understand that my child will be suspended from the program and not allowed to return if they damage town property, another person property, do not follow program rules, do not follow directions given by department staff/volunteers, bully another person and/or harm another person.

WSPD/OCFS Contact

I understand the Town of West Seneca reserves the right to contact the West Seneca Police Department and/or OCFS regarding any issue, statement, threat, comment or concern.

Other

I understand that NYS, Erie County or the Town could change any plans, procedures, policies, etc at any time with no notice. I could arrive at the program and there could be a change I was not notified of (due to the time the change was made and the town's ability to notify). I understand that I must follow and adhere to the change. Further, I understand the Town of West Seneca will notify me of any changes to any policy when they are able to.

I understand that the Town of West Seneca will follow any COVID-19 requirements or mandates put in place by New York State or Erie County. Further, the Town of West Seneca will follow CDC recommendations regarding the virus. This could include requiring face coverings and more. This could change at any time. The Town will notify families as needed.

Acknowledgment

I AGREE to all of the above - FOR myself, my spouse, my children, my minor(s), any other member named on my recreation account (minor or adult), and/or any guests (of any age) that myself and/or anyone named on my account brings to a Town of West Seneca facility, event, activity, program, etc.,

Note: buttons are for display only on this preview page.