



YEARBOOK STAFF

What: In this club, we will produce the 2018-2019 High Plains yearbook.

Student work on the yearbook will happen during January and February work sessions, as we prep layouts for our March turn-in deadline. Students who attend the work sessions during Jan. and Feb. will be eligible to participate during our May sales week before and/or after school.

All yearbook staff students will also have the option of checking out a digital camera and contributing photos of school and/or classroom activities, which comprises the majority of work on the yearbook during the fall semester.

Who: Students in grades 4-5

When: Tuesdays and Fridays in January and February 7:00 am to 7:55 am (beginning January 15). **Members are REQUIRED to attend BOTH weekly meetings.** There is no school and no meeting on February 15. May 20-24 is our sales week, and eligible students may opt to be at school earlier or stay later, provided they attended **all** work sessions in Jan and Feb.

Where: HPE Learning Commons (library)

If you would like to join, please fill out the information on the attached page, along with the Assumption of Risk form (on the back), and return it to Mrs. Edgar in the Learning Commons as soon as possible. **Students without completed forms may NOT come to the club.** Note that students must be arrive promptly at 7:00 am, attend consistently, and be ready to use their time productively or they may asked not to continue in the club.

Upon acceptance, parents will receive an email confirmation and calendar with the dates we intend to meet. Please provide your best email in case of club cancellation or other important communications.

Questions? Reach Mrs. Edgar at dawn.borne@asd20.org.



I want to join the Yearbook Staff!

_____ I will attend **BOTH** Tuesdays and Fridays in January and February (beginning on January 15) at 7:00 am. *There is no meeting February 15.*

_____ I would like to check out a digital camera to take photos for the yearbook.

Student's Name _____

Grade _____

Teacher _____

Parent/Guardian Name (print) _____

Parent/Guardian Phone number: cell _____

OK to text at this number? Yes or No

Other phone number, if applicable: _____

Parent's best email: _____

Please fill out the **ASSUMPTION OF RISK on the back of this sheet and return the completed page to Mrs. Edgar in the Learning Commons.



**ASSUMPTION OF RISK AGREEMENT TO HOLD HARMLESS AND EMERGENCY RELEASE FORM
REGARDING ELEMENTARY SCHOOL-SPONSORED BEFORE AND AFTER SCHOOL ACTIVITIES**

As the parent/legal guardian of the student named here _____ (child's name), I authorize my child to participate in a before or after school-sponsored activity at High Plains Elementary School. I understand that school nurses are not on duty after school hours and that in the event of a medical emergency, school staff will call 911 and parent/guardian. I understand that the health room is not open after school hours. Therefore, I agree that if an inhaler or epi-pen has been prescribed for my child, I will provide those and I further acknowledge that my child has been authorized to self-carry by a health care provider. No medication will be administered by school staff during the before or after-school activity time. If medication is absolutely necessary for the child during the before or after school activity, the parent/legal guardian agrees to assume responsibility for administering the medication outside of normal school hours.

Additionally, by signing below, the parent/legal guardian grants permission to an emergency health care provider to secure proper treatment for the student and the parent/legal guardian agrees to assume all costs for such treatment.

Students participating in the before or after school activity must obey all safety rules and must follow the school's code of conduct and behavior expectations.

This form applies to the following activity: Yearbook Club

Parent/Legal Guardian: Parents/Guardians who do not wish to accept the risks described in this notice should not sign the permission form and should not enroll their child in the before or after school activity.

Parent Signature: _____ Date: _____

Home Phone: _____ Day Phone: _____ Cell Phone: _____

Student's Name: _____ Grade: _____

Emergency contact information in the event above parent/guardian cannot be reached:

Emergency Contact Name: _____ Phone: _____

Emergency Contact Name: _____ Phone: _____

Please return this form and maintain a copy for your records