



# LTBB WAANIIGAANZIJK YOUTH SERVICES AFTER-SCHOOL PROGRAM REGISTRATION FORM

**Monday through Thursday, 3:15PM-5:30PM**

Tribal Youth Ages 6-18: LTBB Enrolled, LTBB Descendants or enrolled in another tribe

**Fall 2024 Location:**

Middle Unit 1A  
525 West Mitchell St. (across from McLaren Hospital)  
Petoskey, MI 49770

Please select days  your child will attend:

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



**PLEASE COMPLETE/PRINT THE FOLLOWING ENROLLMENT INFORMATION:**

**Youth Full Name:** ..... **Grade** ..... **School Name** .....

**Physical Home Address:** .....

**Mailing Address** (if different from physical address): .....

**Youth DOB:** ..... / ..... / ..... **Gender Pronouns** (not required, but helpful): .....

**Youth Tribal Affiliation** (LTBB enrolled, LTBB descendant, enrolled in other tribe) **Tribe and Enrollment #:** .....

**Parent/Guardian Name(s)** (print): .....

**Parent Email:** .....

**Texting Phone:** ..... **Work Phone:** .....

..... **Initial here** to give Youth Services permission to use youth photos and videos on LTBB Government website & program materials, Odawa Trails, program flyers, DOJ/OJJDP funding agency & tribal social media pages

..... **Initial here** to verify that your child's vaccination/booster records are up to date

 **Mail forms to:**  
LTBB Youth Services  
7500 Odawa Circle  
Harbor Springs, MI 49740

**Email registration forms to:**  
**kdominic@LTBBODAWA-NSN.GOV**



Processing registration could take up to 2-3 business days to complete.  
Registration forms are processed in the order received.  
Caretakers will receive an enrollment confirmation once enrollment is complete.

*Waaniigaanzijik After-school Program generally follows local school calendars. Youth Services closes during LTBB Government Holidays, tribal government emergency closures, school holidays, & school snow days. After-school programming may be canceled at any time, with little or no notice. Cancellations may occur due to weather, staffing, illness, building maintenance, or other unforeseen circumstance.*



# LTBB WAANIIGAANZIJK YOUTH SERVICES AFTER-SCHOOL PROGRAM REGISTRATION FORM

Youth parents/caretakers:

Your consent is required for your child to participate in the LTBB Waaniigaanzijik Youth Services 2024/25 After-school Program. Please complete, sign, & return the lower half of this form to the LTBB Youth Director.

**Activity Description:** YS After-school Program

**Locations:** 525 West Mitchell Street, UNIT 1A, Petoskey (across from McLaren Hospital)

**Program Dates:** Tuesday, December 3rd- December 19th & January 6th-June 5th



**The following health and safety protocols will be adhered to:**

- Youth who fall ill or do not pass illness screening must go home with caretaker immediately
- **PLEASE KEEP CHILDREN AT HOME UNTIL SYMPTOM FREE & \*\*FULLY\*\* RECOVERED**
- Emergency mask mandates may be required when community risk level enters **yellow** or **orange** (medium to high risk levels)
- YS staff are not permitted to administer medications to youth
- REMINDER: DISCIPLINARY FORM MUST BE SIGNED & RETURNED TO PROCESS ENROLLMENT
- Healthy snacks provided (please send alternate snack if your child has special dietary needs)

**PARENT PICK-UP/DROP-OFF INFO:**

- Drop-off time is between **3:15-3:45PM**
- Pick-up time is between **5:00-5:30PM**
- Late drop-offs are not allowed
- **Parents should remain in vehicle when picking up and leave promptly to keep the pick-up line moving (seatbelts first of course)**
- For Petoskey Schools bussing information, please call Petoskey Bus Garage at 231.348.0178
- Chronic lateness at pick-ups will result in earlier pick-up time or program ineligibility
- Disrespectful behavior/language toward Youth staff will result in program ineligibility



My child, \_\_\_\_\_, is allowed to participate in the Waaniigaanzijik Youth Services After-school Program for the 2024/25 school year.

**In the case that we cannot get a hold of you (parent/caretaker), please list an EMERGENCY contact that has your permission to pick up your child:**

Emergency Contact Name: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_

Work Phone Number: \_\_\_\_\_

Mobile Number: \_\_\_\_\_

Relationship to Child: \_\_\_\_\_

**MEDICAL/HEALTH INFORMATION:**

**Please list medications, allergies, medical needs, learning challenges, mental health and/or behavioral conditions or known trauma triggers:**

\_\_\_\_\_



I give permission for emergency medical treatment upon injury: **Yes** ..... **No** ..... (check one)

Food or other allergies, please specify: \_\_\_\_\_

Family doctor/health clinic name & phone number: \_\_\_\_\_

**By signing this form, I agree to all program protocols and policies set by LTBB Youth Services:**

Relationship to Child: \_\_\_\_\_



Parent/Legal Guardian Signature

Date signed: \_\_\_\_\_/\_\_\_\_\_/2024 /25 School Year



# LTBB WAANIIGAANZIJIK YOUTH SERVICES TRANSPORTATION REGISTRATION AND SCHOOL BUSSING INFORMATION

## TRANSPORTATION TO LTBB YOUTH SERVICES

- Youth can ride the Petoskey Public Schools shuttle bus **number 10** to Lincoln Elementary School from Petoskey Middle School. From Lincoln Elementary School, Youth staff will walk Youth over to our new after-school building located at 525 West Mitchell St., Commercial UNIT 1A.
- Please register your Youth for **shuttle bus 10** by calling the Petoskey Bus Garage at: **231-348-0178**.
- Parents/Caretakers: please inform your child's **school office** and **teacher** that your child plans to ride the shuttle bus number 10, from Petoskey Middel School, down to Lincoln Elementary School.
- Parents, you are responsible for your child’s arrival at Lincoln Elementary School.
- Parents, you are responsible for transporting your child to Youth Services after-school program if he/she/they miss the shuttle bus #10 to Lincoln Elementary School.
- Youth Services Disciplinary Policy will be enacted if Youth do not follow given directions/safety instructions while walking or riding in LTBB Government Vehicles.

**BY SIGNING BELOW, I AGREE TO THE ABOVE INSTRUCTIONS/POLICIES AND GIVE PERMISSION FOR YOUTH SERVICES STAFF TO WALK OR TRANSPORT MY CHILD IN A GOVERNMENT VEHICLE, FROM THE LINCOLN ELEMENTARY SCHOOL TO LTBB YOUTH SERVICES AFTER-SCHOOL PROGRAM, LOCATED AT 525 W. MITCHELL ST., PETOSKEY.**



.....DATE:...../...../2024/25  
**Parent/Legal Guardian Signature**