

# SCS Robotics Club

## 2017-18 School Year

GENERAL INFO CONTACT: Alison Magill alison@seacoastcharterschool.org  
CLUB LEADER: Kayla Hoffman kayla@seacoastcharterschool.org

SCS is so excited to be offering a robotics club this year! The club will be meeting Mondays after school and is **open to any student in 4<sup>th</sup> - 8<sup>th</sup> grade**. Kayla Hoffman, our 7/8 Math teacher will be leading the club with the help of two parents, Dorn Cox and Matt Berry. Robotics club will be purchasing a kit to build one robot collaboratively. The exact plans will be determined by the club leaders and members. Since club fees are determined individually and based on the unique needs of each club, the cost of this club was determined by the cost of the kit. There may be additional expenses due to travel or fees for tournaments. Our first tournament is scheduled for 11/18. **AN INITIAL MEETING WILL BE HELD FRIDAY 10/13 AFTER SCHOOL.** We will meet Mondays thereafter.

Days and Dates: Mondays beginning October 16<sup>th</sup>  
Times: 3:30-4:30  
Club Fee: \$100.00 per student. Families can choose to make one full payment or two payments of \$50 each. The second payment is due March 5<sup>th</sup>. Please contact Alison Magill if you need to make other arrangements or are in need of assistance. Checks should be made out to Seacoast Charter School.  
Water/Snacks: Students are reminded to bring their own water bottles and snacks to eat after school. The snack should be a nut-free snack.  
Liability Waiver: Please fill out the liability release agreement. Your signature granting your child permission to participate in the activity also indicates that you read and understand the release agreement.

### Student Information

Please return both pages to the office by October 13, 2017

Student Name \_\_\_\_\_

Grade \_\_\_\_\_ Teacher \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_ Phone \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_ Phone \_\_\_\_\_

Email address \_\_\_\_\_

Please list any medical issues the Class Leader should be aware of:

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## Payment Information

The annual cost for robotics Club is \$100, payable in full or in two payments of \$50 each. Please indicate which option you are choosing.

The full payment of \$100 is enclosed. \_\_\_\_\_

OR

I would like to make 2 payments of \$50. Payment 1 is enclosed; payment 2 is due March 5<sup>th</sup> \_\_\_\_\_

**Total Enclosed:** \_\_\_\_\_

## Club Participation Waiver

By signing this form, I acknowledge the following:

1. I acknowledge that I have been informed as to the nature of the activity.
2. I must provide the school staff and class leaders with medical or other important information that I feel the school should know about my child prior to the start of this activity.
3. I represent that my child is physically fit to participate in this activity.
4. My child must adhere to all the rules, regulations and instruction pertaining to the safety and participation in this activity.
5. I hereby consent to medical treatment for my child, which may be deemed advisable in the event of injury, accident and /or illness during a school activity.
6. I certify that my child's medical expenses are covered by a medical insurance policy or if not, I accept absolute financial responsibility for such in the event that expenses are incurred.
7. I/we acknowledge and understand the risk and requirements for our child to participate in this activity.

I HAVE READ AND UNDERSTAND THIS RELEASE AGREEMENT

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

**Make sure you have signed and dated this waiver section!**