



Youth Services Department
 P.O. Box 1090
 Nome, Alaska 99762
 Phone: (907) 443-9122
 Fax: (907) 443-3539
 www.necalaska.org



Culture Club

After School Activity Program

Participant's Name: _____ Birth date: _____
 Age: _____ Grade completed: _____ Male: _____ Female: _____
 Parent(s)/Legal Guardian(s) Name: _____
 Physical Address: _____
 P.O. Box Number: _____
 Home Phone: _____ Parent/Guardian Work Phone: _____
 Parent/Legal Guardian Cell Phone: _____
 Parent/Legal Guardian E-Mail Address: _____

.....

Emergency Contact Phone (other than parents): _____
 Home Phone: _____ Work Phone: _____
 Health Insurance Company: _____
 Policy: _____

.....

Tribally enrolled with Nome Eskimo Community? Yes: _____ No: _____
 (Tribal enrollment is required to participate)
 Do you have any allergies? (Mosquito bites, medicines, foods, etc.) Yes: _____ No: _____
 If yes, please explain: _____

 Are you currently taking any medications? Yes: _____ No: _____
 If yes, please explain: _____

Other pertinent facts to which staff and/or a medical physician should be alerted:

Please complete and return application to Nome Eskimo Community at

200 W. 5th Avenue or Fax 907-443-3539



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YOUTH PARTICIPATION AGREEMENT

Participant's Name: _____

As a participant of the 2017 Culture Club After School Activity Program, I agree to the following:

1. I am responsible for my own actions and will act in a mature manner at all times during the activities.
2. I agree to attend and participate in all the scheduled activities that I have signed up for.
3. I will NOT use alcohol, tobacco or other drugs during the activities.
4. I will honor the activity schedule; therefore I will not leave the premises of the activity unless accompanied by an NEC staff. I will be accountable for my whereabouts at all times during the activities and will keep a staff person informed of my intentions.

A violation of the terms outlined above may result in the participant being restricted from participating in any future NEC funded activities.

I, the participant, agree to the above terms and conditions.

Participant's signature _____ Date _____



I have read the above youth participation agreement and discussed the consequences of violating any of these agreements with my child.

Parent/Legal Guardian Signature _____ Date _____

Relationship _____



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PARENT PERMISSION FOR STUDENT PUBLICATION

NOME ESKIMO COMMUNITY

Activities and events sponsored by Nome Eskimo Community occasionally are photographed or videotaped by staff and students for publication in NEC presentations, websites or the Nome Nugget Newspaper. Please initial the boxes below to indicate the level of publication permission you would like to grant your child. Sign and date and return to NEC as soon as possible.

CHECK THE APPROPRIATE BOX/ES:

- Nome Eskimo Community may publish my child’s picture on the internet (example – NEC website)
- Nome Eskimo Community may publish my child’s first name on the Internet
- Nome Eskimo Community may publish my child’s last name on the Internet
- Nome Eskimo Community may publish my child’s picture or video clips for NEC sponsored projects. (Example ~ NEC tribal council meetings, annual meetings)

Participant’s Signature

Date

Parent/Legal Guardian Signature

Date

The Nome Public Schools bus schedule offers a delivery route from NPS that stops close by the Nome Eskimo Community for K-6th grade. Please see the bus stop information below, transportation home will need to be provided by the Participants Parents.

Delivery times are approximate. All routes take approximately 15-20 minutes per Nome Public Schools 2017-2018 Bus Schedule, information is available on their webpage at <https://www.nomeschools.org/Page/75>

Afternoon Delivery	Approximately	Red Route
Grade levels K-2	2:10PM	Stop # 16
Grade levels 3-6	2:40PM	Stop # 16



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AFTER SCHOOL ACTIVITY PROGRAM RELEASE WAIVER AND INDEMNIFICATION

The undersigned participant and his/her parent or legal guardian, do hereby execute this release, waiver and indemnifications for himself/herself, and his/her heirs, successors, representatives and assignees and hereby agrees: To release the Nome Eskimo Community and its employees, volunteers, agents, and all its representatives from any and all liability, loss, damage, and costs, claims or causes of action including, but not limited to, all bodily injuries and property damage arising from participating in the Nome Eskimo Communities After School Activity Program. The undersigned further agrees to indemnify and hold harmless the Nome Eskimo Community and its employees, volunteers, agents, and all its representatives from any and all liability, loss, damage, costs, claims, or causes of action, including attorney’s fees and witness costs, arising out of the undersigned’s participations in the Nome Eskimo Communities After School Activity Program’s sponsored activities or events.

AGREEMENT AND CONSENT FOR PARTICIPATION AND NECESSARY TREATMENT

This is to certify that, I the undersigned participant, or parent/guardian if the participant is under 18, hereby consent to and authorize the participation in the NEC activity, as well as administration and performance of all needed medicines, surgical treatments, and administration of any anesthetic, which in the opinion of the attending physician, may be necessary and advisable in the event of the medical emergencies to the participant. It is understood that efforts shall be made to contact the undersigned parent or guardian prior to rendering emergency treatment to the patient.

 Participant’s Name Date

 Participant’s Signature Date

 Parent/Legal Guardian Signature Date

 Youth Services Staff Signature Date

***If you have any question, please contact
 Nichole Pomrenke, Youth Services Specialist, at (907)443-9122
 Quyannaqruk!***