BARNSTABLE RECREATION FRIDAY NIGHT SOCIAL/SATURDAY SUNSHINE 22/23 REGISTRATION PACKET

ABOUT THE PROGRAM

Please join us for the Friday Night Social or Saturday Sunshine Program! Or join us for both if you like! We are a social group for individuals age 16+ who have mild to moderate disabilities!

At the Friday Night Social we get together for dinners, dances, movies, plays, cookouts, Bingo and much more! The activity times are generally 6:30-9:00 PM.

At the **Saturday Sunshine Program** we bowl every other weekend and mix in a little movies, shopping, plays, lunches out on our alternate Saturdays. We also participate in the Special Olympic Bowling in the winter.

Transportation to and from activities is available to Barnstable residents for the fee of \$15 per month (seats are limited). You may also drive or be dropped off and picked up at each activity location.

MEMBERSHIP FEES

- \$100 for Barnstable residents
- \$300 for non-residents

Prices are for each program.



SIGNING UP FOR ACTIVITIES

Once your packet is complete and returned with your membership fee, monthly schedules will be mailed or emailed to you. Please sign up for each activity at least 48 hours in advance!

RETURNING YOUR PACKET

- Return your packet to the HYCC, 141 Bassett Lane, Hyannis in person at the front desk from 8:30 AM-4:00 PM
- Return it into the Parking Permit black locked drop box outside of the HYCC front doors.
- Email to: michelle.davies@town.barnstable.ma.us
- FAX to: 508-790-6279



Town of Barnstable BARNSTABLE RECREATION

JOHN GLEASON

Interim Recreation Director

141 Bassett Lane, Hyannis, MA 02601

T: 508-790-6345 | F: 508-790-6279 | E: John.Gleason@town.barnstable.ma.us



Dear Member,

The Barnstable Recreation Special Needs Friday Night Social Program and Sunshine Program is geared towards individuals with mild to moderate developmental disabilities, ages 16+. Weekly social activities provide opportunities for recreation/socialization through many varied activities that are planned throughout the year. Some of the activities our members enjoy are: bowling, dinners out, plays, arts and crafts, BINGO, dances and much, much more!

Membership is gained by completing an application, emergency card and paying a membership fee. You can choose either the FNS or the Sunshine Program, or if you like, join both programs. Barnstable fees are \$100.00 for Barnstable Resident/Taxpayers, \$300.00 for Non-Resident/Taxpayer for each program. Financial Aid is available for qualifying applicants. Submit a 2020 Tax form and pay 50% of the cost of the program at the time of registration.

Transportation, to and from the program, is available for Barnstable Residents only, for a fee of \$ 15.00 per month; due the first Friday/Saturday of each month. SPACES FOR TRANSPORTATION ARE LIMITED AND WILL BE FILLED ON A FIRST COME, FIRST SERVE BASIS.

Any activity requiring a participant to pay a specific amount of money for an event will be listed on each monthly calendar. Please pay activity fees in cash. They will be sent to you by mail or email, please read them carefully. Do not attempt to attend an activity unless you have the required amount of money needed for that event and have made a reservation at least 48 hours in advance. Participants may bring extra money, but are responsible for it themselves.

The Friday Night Social will meet on Friday evenings for 2 to 3 hours, usually around 6:30-9PM. The Friday Night Social runs from June 3, 2022-June 30, 2023. The Sunshine Program meets on Saturday Afternoons for 2-3 hours and usually between 1-3PM. The Sunshine Program begins Sept. 17, 2022 and ends in the spring. The monthly calendar will provide specific times and locations for drop off and pick up. It is important to be on time.

Group residences must have a staff member present during the entire length of the program. <u>Participants may not be left unattended at any time</u>. Staff are welcome for free unless we are going out to eat, which you will have to pay for your meal.

Sign up procedures are easy. All participants must sign up for activities at least 48 hours in advance (unless otherwise noted on calendars). This is done by calling the Recreation Division at 508-790-6345 X 107, leave a message if you get voice mail. Sign up is especially important when we are going to outside events, as we must arrange for transportation, reservations and staffing for the appropriate numbers.

Please note that when you are dropping off or picking up, that you see a Recreation staff person. Make sure that the participant is signed up and at the end of the night, the staff is aware that you are picking them up.

Behavior of all members is expected to be appropriate during activities as well as on the transportation vans. This includes:

- Following directions given by staff.
- Treating staff and other participants with respect, i.e., answering when spoken to.
- No disruptive behavior, i.e. swearing, yelling, talking back, aggressive gestures, property damage, etc.
- Participants are expected to stay with the group at all times, or they will not go out on future outings.
- Participants must participate in every activity that they attend.

Any participant unable to adhere to the proper behavior guidelines will be subject to suspension as follows:

- Immediate suspension will be enforced whenever participants exhibit physically aggressive behavior, or behavior deemed inappropriate in public.
- Graded step suspension will be enforced on a two-step basis. First, a verbal warning will be given. If behavior continues or accelerates, an immediate suspension will be given. These behaviors include rudeness, non-compliance, inappropriate language, etc.
- Length of suspension will depend on the severity of the behavior exhibited.
- Notification of suspension will be sent home with each participant and should be signed and brought back upon return to the program.
- A participant will be allowed three suspensions from the program, where upon they will no longer be eligible to participate in the program.

At this time, I am taking registrations for the Friday Night Social Program and Sunshine Program. If you choose to register, please fill out the enclosed forms and get them back to the Recreation Office (Hyannis Youth & Community Center, 141 Bassett Lane, Hyannis as soon as possible (either by mail or in person). Remember that these programs, as well as transportation, are provided on a first come, first serve basis. If you would like transportation for the year, you must make a reservation when you register. You will be notified by phone/letter if you are one of the 24 Barnstable Residents who will be picked up and dropped off by us.

If you have any further questions, please feel free to call the Recreation Office at: 508-790-6345 X 107 or email: michelle.davies@town.barnstable.ma.us. Thanks for your cooperation during this process. We look forward to seeing you on the weekends!

Sincerely,

Michelle Davies

Therapeutic Program Coordinator

PERSONAL INFORMATION

Member's Name:	Birth Date:	Sex:	Age:
Address:		Home Phone:	
		Cell Phone:	
-		Email:	
Parent/Guardian/ Case Worker name:		Home Ph	none:
Work Phone: Cel	l Phone:	Email:	
Emergency Contact:	Em	ergency #:	
If the parent/guardian/case Worker, o Friday Night Social/ Sunshine staff for	- ,	•	s permission granted to the NO
Please indicate any needs, disabilities,	, or diagnoses that yoυ	ı may have on the lir	ie below:
Do you require any of the following me	echanical supports? (P	lease circle any that	apply):
Hearing Aid Glasses Splints	Walker Cr	utches Whee	elchair
Additional Information:			
Neurological Orthor Additional Information: Allergies (please list): Medication (please list):	pedic Hearing	Vision Motor I	mpairment
Other (please list):			
Do you have any behavioral difficulties If yes, please give additional informati		NO	
Do you need assistance with toileting? Additional Information:	YES	NO	
Do you need assistance with eating? Additional Information:	YES	NO	

TOWN OF BARNSTABLE – RECREATION DIVISION FRIDAY NIGHT SOCIAL SUNSHINE PROGRAM

Name:				Home Phone:	Cell:
F	First		Last		
Gender:	M	F	Other	Birthdate:	
Address_					
E- Mail Ac	ddress				
Primary P	arent/Guard	lian/Resi	dential Manager:		<u> </u>
Home Pho	one:		Cell Pho	one:	
Address:					
E-Mail add	dress				
Residentia	al Manager/	Case Wo	rker:		Home Phone:
Address:	(if different)	·		Work Ph	one:
Emergeno	cy contact: _			Phone: _	
Address:				Relationship: _	
	Friday Nig	ht Social	(719614-A) \$100 Resid	dents/ \$300 Non Residents	Saturday Sunshine (919619-A) \$100/ \$300
			PLEASE PLACE A CH	HECK BY THE PROGRAM YOU	J WISH TO ATTEND
Commonwall actions any way ghereafter has or her participatits success the part cof Barnstable attorneys	wealth of Ma s, causes of growing out of have as the reafter may tion in the To sors, depart of said indivitionable Recreat e or its succe	ssachuse action, c of, direct parent c acquire, own of B ments, o dual grov ion Divis essors, d own of B	tts, and its successor laims, demands, dar laims, demands, dar la or indirectly, all lar guardian of said in either before or after arnstable Recreation officers, employees, swing out of or resulting out of or resulting partments, officers arnstable or its representation.	rs, departments, officers, em nages, costs, loss of services, known and unknown personal dividual, and also all claims of er he/she has reached his/he Program; FURTHERMORE, I has servants and agents against a ng from injury to said minor es or programs, and to INDEA , employees, servants and ag	Town of Barnstable, a municipal corporation of the uployees, servants and agents, of and from any and expenses and compensation on account of, or in injuries or property damage which I may now or or right of action for damages which said individual or majority resulting or to result from his/her nereby agree to protect the Town of Barnstable and my claim for damages, compensation or otherwise or in connection with his/her participation in the Town MNIFY, reimburse or make good to the Town of ents any loss or damage or costs, including if any litigation arises from said individual's
Signature	e of Parent	t/ Guard	dian:		
(Members (under 18 years	old)			
Signatur	e of adult n	nembers	5:		Date:

TRANSPORTATION INFORMATION

The Friday Night Social Program and Saturday Sunshine Program offers transportation to and from the program for Barnstable Residents/Taxpayers. If you are interested in reserving a seat on the van, please complete this Reservation Form and send it back with all of the completed Registration materials. There is limited seating on the vans and these spots will fill quickly! The first 24 members to send all of their completed paperwork to the Recreation office will reserve their spots for the year.

If you are one of the 24 members that will ride on the van, you will be notified and more information will be given at that time. If you are <u>not</u> notified, you <u>do not</u> have a reservation for the van and will be responsible for your own transportation to and from the program.

The transportation fee is \$15 per month per program, due on the first Friday/ Saturday of each month.

After you receive your monthly schedule, remember to call the Recreation Office at 790-6345x 107 at least 48 hours in advance, to sign up for the activities that you would like to attend. The van will only stop for participants who have signed up for that activity.

Any Questions? Call the Recreation Office, we'll be glad to help any way we can!

Cut, detach and send in with your Registration Form

RESERVATION FORM

Yes, I would like to make a reservation for Friday Night Transportation.

Yes, I would like to make a reservation for Saturday Transportation.

I understand:

- I will call and make a reservation up to 48 hours before each activity.
- The payment is \$15 the first Friday of each month and that the bus will only stop at your home if you have signed up for that activity at least 48 hours in advance.
- The \$15 payment is due every month regardless of how many activities you attend, or if you provide your own transportation for some reason. That there is limited seating and reservations are taken on a first come, first serve, basis. If you are one of the first 24 to sign up you will be notified

Name:	Telephone#:	_
Pick-up Address:		
I understand and agree to all of the co	onditions stated above:	
Signature of member/ parent/ guardia	ian /Residential Manager Date	