



Program Policies Agreement and Liability Waiver For Custom Program Locations in Ohio

This agreement is made voluntarily by me on my own behalf, and on the behalf of my heirs, executors, administrators, legal representatives and assigns to Open Doors, Inc., dba Open Doors Academy (ODA).

I hereby certify that I am over 18 years of age and am competent to contract in my own name. I also certify that I am the legal guardian of the minor child and legally make this agreement on their behalf.

This agreement shall be effective beginning September 1, 2025, or the start date of enrollment, and remain in effect until May 30, 2026.

Part I: PROGRAM POLICIES

1. **Eligibility:** Participants must be between 5-18 years of age and have completed all required enrollment documentation. Eligibility by age is dependent on funding at each respective campus.
2. **Program Costs:** The parent/guardian may be responsible for some costs, including costs associated with field trips or providing any additional spending money for incidental expenses such as souvenirs, t-shirts, snacks, etc.
3. **Arrival and Pickup:** Parents and participants are responsible for ensuring that participants arrive and depart on time to the program location.
4. **Permission to Transport:** I give permission for my child to attend all program related field trips and travel under the supervision of ODA staff. An ODA staff member will supervise students during field trips and travel from the campus to the drop off/pick up location via contracted bus service.
5. **Walking Home:** Participants who walk home from the program must have written consent below from a parent/guardian.
6. **Authorized Emergency Contact:** All participants must be picked up from the program by a designated individual specified by a parent/guardian during registration.
7. **Timeliness Policy: Students must attend all programs and planned events on time.**
8. **Timely Pickup:** I acknowledge that if I do not agree to the Self-Transportation Waiver, it is my responsibility to ensure that a parent/guardian or an authorized emergency contact picks up my child from ODA program in a timely manner. I understand that repeated late pickup is grounds for dismissal from the program.
9. **Programming Changes:** ODA is responsible for providing programming services to the participants. If the services and accommodations offered cannot be provided due to causes beyond the control of ODA, all efforts will be made to provide comparable services and accommodation.

10. **Medical Transportation:** In the event of a medical emergency, ODA has permission to secure emergency transportation for any child. The emergency transportation service will determine the facility to which the child will be transported.

Parent/Guardian Signature

Date

Part II: LIABILITY WAIVER

I, the undersigned, understand and agree to this legally binding Consent Form and Release of Liability.

1. **Photography and Video Release:** ODA and its partner organizations, including but not limited to programming partners, funding partners, contracted service providers, and/or curriculum partners, have my permission to use, reproduce, and/or publish photographs and/or videos of my child and/or family while participating in ODA activities and events related to the summer camp program. I understand that the photographs and/or videos, including the image, likeness, and/or voice of myself, my family, and/or my child may be used in publications, public affairs releases, presentations, multimedia exhibits, posters, brochures, advertisements, recruitment materials, broadcast public service advertising (PSAs), and other promotional areas on behalf of the ODA program and/or its partner organizations without compensation to me or my children and/or family. This material may also appear on the internet website and/or digital social media services of ODA and/or its partner organizations. All such photographs and videos will be maintained as the property of ODA and/or its partner organizations with all rights reserved.
2. **Liability Release:** While participating in this program your child may be exposed to certain risks. These risks include, but are not limited to, accident and/or sickness without readily available medical facilities, the forces of nature, and acts of war. By completing enrollment, you are acknowledging and assuming these risks. Parents and participants in the program waive any liability against ODA and its employees, directors, volunteers, partner organizations, and contracted service providers for any injury, loss, damage, accident or expense. The parent(s)/guardian(s) acknowledges that participant is participating under the responsibility of parent/guardian and releases ODA, its staff, and partner organizations from any liability related to health and safety.

Upon completion of registration, I certify that the information I filled in is complete and genuine. I have read and agree to the Program Waiver.

Parent/Guardian Signature

Date

Parent/Guardian Name

Part III: BEHAVIOR POLICY

ODA reserves the right to cancel and/or terminate participation or refuse service to any participant who fails to comply with the rules of the program, or for any other reason deemed necessary at the sole discretion of ODA.

Program Rules for Participants: I understand and agree that my child will be subject to ODA program rules and all applicable laws during all program activities and transportation periods, including:

1. Be respectful of all staff and peers.
2. Actively participate in all activities.
3. Follow all directions of program staff, e.g. walking in line, being quiet while waiting, etc.
4. Remain in designated program space in the presence of ODA staff at all times.
5. Do NOT bring any weapons, cash, or items of value to the program.
6. Do NOT bring perishable foods, allergen foods, or pork items to the program.

Repeated misconduct will be reported to parents/guardians and could result in suspension or removal from the program. High risk misconduct, such as fighting or leaving the program space without permission, will result in immediate removal from the Program.

Any threats of or acts of violence by a program participant, whether made digitally, verbally, or physically, are grounds for immediate removal from the Program and a ban from all future enrollment in ODA programs.

ODA reserves the right to confiscate items that are a danger to other students or staff. Confiscated items, such as weapons, banned food items (nuts, pork, etc.), may not be returned until the conclusion of the program if they pose a safety risk.

I understand and agree that if my child is removed from the program, a parent, guardian, or emergency contact may be required to immediately pick-up my child from the program location.

Parent/Guardian Misconduct: I understand and agree that parent(s)/guardian(s) are expected to be courteous and respectful of ODA staff, partner staff, fellow parent(s)/guardian(s), program participants, school staff, security staff, custodial staff, and culinary staff. Parent(s)/guardian(s) must obey all local laws, traffic laws, and ODA program rules.

Misconduct by a parent/guardian that poses a risk to other program participants, ODA staff, partner staff, or other parent(s)/guardian(s) will result in the family's removal from the Program.

Any threats of or acts of violence by parent(s)/guardian(s), whether made digitally, verbally, or physically, are grounds for immediate removal from the Program and a ban from all future enrollment in ODA programs.

Parent/Guardian Signature

Date

Part IV: COMMUNICATION AUTHORIZATION

I agree to receive phone calls, text messages, and email reminders from ODA about program updates. I certify that the contact information I provided us is my current contact information, not someone else's.

I understand that if the phone number or email address on file is not accurate, it is my responsibility to inform ODA of my new contact information; I also understand that if I do not update ODA about my contact information, ODA is not liable for any important program details that I may not receive.

I understand that ODA may update our communication methods at any time based on program needs.

Parent/Guardian Signature

Date

Part IV: Release of Academic Information and Permission to Provide Support Services

I give permission to the staff of Open Doors Academy to communicate with my scholar's school to provide my child with the most comprehensive support.

I agree to allow Open Doors Academy to:

- Receive copies of my child's report card, attendance, 504/IEP plans, progress report, Ohio State Standardized Testing results, and other test results that may be used to closely evaluate my child's academic growth and success.
- To meet with my child and school staff to help mediate/support any issues which may arise, including receiving copies of intervention or behavioral plans or updates regarding disciplinary measures.
- If my child is determined eligible and granted an IEP, I give permission to the staff of Open Doors Academy to receive a copy of the IEP in order to assist my child in working toward their goals.
- I understand that all information collected will be kept confidential and any reporting of grades or achievement scores to funders/stakeholders will be provided in group summary without any identifying information attached to them.

Parent/Guardian Signature

Date