

## **WELCOME TO MATT'S PLACE!**

Our mission is to equip youth to honor God in practical areas of life. We focus on 5 different areas: academics, health, finance, community service and skills and interests. Through Matt's Place After School we offer classes and programs throughout the year designed to equip your teen in these practical ways. They are welcome to attend one or both days a week, or for just one class. Please fill out the attached release form and return it to Chesapeake Church. Please also read the transportation information so you can make appropriate arrangements. If you have any questions, please don't hesitate to contact me or visit our web-site at [matts-place.org](http://matts-place.org).

We are looking forward to serving your teen!

Tracy Howard  
Matt's Place Program Director  
410-257-0700 (Phone)  
410-257-0296 (Fax)  
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## **MATT'S PLACE AFTER SCHOOL**

**AUDIENCE:** Students in 7<sup>th</sup> - 12<sup>th</sup> grade.

**LOCATION:** The Journey Room at Chesapeake Church.

**TRANSPORTATION:** Our shuttle (white Chesapeake Van) runs to the following schools; NMS, NHS, PPMS and WHMS. A school bus operates from HHS.

**SCHEDULE:** Tuesdays and Thursdays from 2:30 until 5:30 pm. We are closed on school holidays and weather closings, including 2-hr early dismissals. We will be open on 2-hr late arrival days. Check [matts-place.org](http://matts-place.org) for our full calendar.

2:30 – 3:30: Arrival, hang out

3:30 – 4:30: Classes (see current line-up at [matts-place.org](http://matts-place.org))

4:30 – 5:30: Tutoring, homework help, special programs

**SNACKS:** All snacks and drinks are 25 cents.

**PAYMENT:** There is no cost for Matt's Place After School. On occasion participation in some classes may require a minimal fee for materials.

## MATT'S PLACE TRANSPORTATION INFORMATION

**SCHOOL GUIDELINES:** All students will need a note on file in the school office. **Please see examples of notes below.** School offices will not remind students when Matt's Place is open.

- **HHS:** Bus note. Students will ride bus # 61.
- **NMS:** Shuttle note. Students dismissed with car riders.
- **NHS:** Shuttle note. Go to Van at NMS on Flint Hill Rd. (With all other NMS car rider traffic.)

**\*\*The shuttle takes 2 trips to Northern schools, so just wait by Flint Hill Rd. and it will come back in about 10 minutes.**

- **PPMS:** Shuttle note. Students dismissed with car riders.
- **WHMS:** Shuttle note. Students dismissed with car riders.

### **\*\*SAMPLE TRANSPORTATION NOTE TO BE GIVEN TO SCHOOL OFFICE**

Please remember, we ARE NOT OPEN on school weather closings including 2-hr early dismissal days, but we ARE OPEN on 2 hr delay days.

Parent Name: \_\_\_\_\_

Day-time Phone: \_\_\_\_\_

School: \_\_\_\_\_

I give my student, \_\_\_\_\_  
permission to ride bus # \_\_\_\_\_ /the shuttle van from school to Matt's Place at  
Chesapeake Church on Mondays and Thursdays during the 2009-2010 school  
year. Thank you!

Parent Sig. \_\_\_\_\_ Date: \_\_\_\_\_

Chesapeake Church  
P.O. Box 936-6201 Solomon's Island Rd.  
Huntingtown, MD 20639  
410.257.0700  
chesapeakechurch.org



Teen Name: \_\_\_\_\_ Gender: \_\_\_\_\_  
Last First Middle

School: \_\_\_\_\_ Grade: \_\_\_\_\_ DOB (m/d/y): \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
Street C/S/Z

Home Phone: \_\_\_\_\_ Youth Cell: \_\_\_\_\_

Youth E-mail: \_\_\_\_\_ Parent E-mail: \_\_\_\_\_

Daytime Contact/Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Emergency Contact/Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

**Photo Release:** I give permission for my teen's name or photo to be used in marketing material for Matt's Place. \_\_\_ Yes \_\_\_ No

**Ride Release:** I give permission for my teen to ride in a car, van or bus driven by Matt's Place staff or volunteers. \_\_\_ Yes \_\_\_ No

**Grade Release:** Students record grades at every interim and quarter so we can help them stay accountable. If you would NOT like your student sharing grades with us, please initial here. \_\_\_\_\_

**Medical/Event Release:** \_\_\_\_\_ has my permission to attend all youth activities sponsored by Matt's Place at Chesapeake Church (hereinafter "Matt's Place") from **September 2009** to **September 2010**. I affirm that I have legal custody of the child named above and consent to him/her attending events and participating in activities organized by Matt's Place. I understand there are inherent risks involved in any event/activity and hereby release and hold harmless Matt's Place (its employees, agents, and volunteer workers) from any and all liability for any personal injury, or loss or damage to personal property, that may occur during the course of my child's involvement. In the event that my child is injured or becomes ill and requires immediate medical attention, I consent to all reasonable medical treatment as deemed necessary by a licensed physician or hospital. In the event that such medical care is required, I hereby release and hold harmless Matt's Place (its employees, agents, and volunteer workers) from any and all liability or claims arising from or caused by the provision of medical care. I also affirm that my child is covered by health insurance, and agree that I will be responsible for the cost of any medical care not reimbursed by my health insurance provider.

**Dismissal:** Please pick up and sign out your teen no later than 5:30.

**Transportation/Attendance Plans:**

\_\_\_ My teen will need transportation from \_\_\_\_\_. (School)

\_\_\_ My teen will drive or be dropped off.

\_\_\_ My teen plans to attend just one class. Class name: \_\_\_\_\_.

\_\_\_ My teen plans to come just one day. Tuesday / Thursday (please circle)

**By signing we state that we have read and understand the above policies.**

**Youth Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Parent Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_