



# **2023 POLICY HANDBOOK**

Skeels-Mathews Community Center & King Kennedy Community Center



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#### **Educational Value**

Organizational Overview: Skeels Mathews and King Kennedy Community Centers provide services and programs for all Portage County, Ohio residents. Located in predominantly African American communities, they work to build local residents up through programming and community-based activities. The centers offer youth programming, including after-school services, a summer youth enrichment program, and a support group for youth called C.A.R.E (Children Always Resisting Enemies). Programming is also available to adults and seniors, including weekly congregate meals, daily lunches for seniors, adult nutrition and computer classes, holiday dinners, and other special community events throughout the year.

Educational Value: Skeels Mathews and King Kennedy Community Centers strive to provide educational enrichment to youth in Portage County by offering after-school programming to students K-12. Their programming is designed to support youth as they work to complete homework assignments, study for tests, and help with subjects they are struggling in as a means to improve their academic success. Our after-school aids also collaborate with teachers daily to communicate about each student's needs to better specialize services. Our after-school services aim to help build social and emotional skills, increase confidence, and provide youth with additional supports to help them achieve academic success. After-school aids are comprised of community volunteers and partners, including retired teachers, Kent State students, and Foster Grandparent volunteers and services are available on alternating days at each center Monday through Thursday, from 4-6pm.

#### **Anti-Bias Statement**

King Kennedy Community Center and Skeels-Mathews Community Center are committed in all areas to providing an environment that is free from discrimination and harassment. We will not tolerate discrimination and harassment based upon an individual's sex, race, ethnicity, national origin, age, sexual orientation, religion, or any other legally protected characteristics. We strive to engage youth in programs that support the development of cultural competency. Our programs help youth understand and respect their own culture and the cultures of others, where they are able to contribute to a multicultural society and demonstrate acceptance for differences among people.

#### **Non-Discrimination Policy**

All people are welcome regardless of race, religion, sex, age, national origin, marital status, sexual orientation, gender assignment, political ideology, or ability.

# ADA Policy

It is our intention to include people of all abilities in our programs in the most integrated setting and wherever it is reasonably possible to do so. This includes individuals with a physical, mental or emotional need that substantially limits a major life activity, individuals with a record of such need, or individuals who are regarded as having such needs.

### **Anti-Bullying Policy**

King Kennedy Community Center and Skeels-Mathews Community Center will have zero tolerance for bullying. Bullying is defined as unwanted, aggressive behavior that involves a real or perceived power imbalance. If a child's behavior is considered bullying, we will work with the parents/guardians on ageappropriate interventions and consequences. If the bullying behavior does not stop, the child may lose the right to attend any activities within the community center.

#### Parent/Guardian Code of Conduct

We are committed to providing a safe and nurturing learning environment for your child. In an effort to ensure your child's development is met in a positive way, we ask that you as the parent(s)/guardian(s) agree to the following:

- To make every effort to follow all policies and procedures as expressed in this handbook. You understand that it is your responsibility to read and comprehend the policies set forth and to follow them to the best of your ability.
- To strive to support the center in the way you communicate with the children, the staff, and other parents. You will not be discourteous to, threaten, or use inappropriate language or actions towards any child (yours or other), staff, or other parents/guardians.
- To not approach any child other than your own to obtain confirmation, clarification, or "their view" on community center-related issues, disputes, or disagreements between children. Such matters must be brought to the attention of the staff.
- To not approach any staff member requesting confidential information in regards to any child but your own. Should you violate the above guidelines, you understand that your child's enrollment may be terminated.

#### **Zero Tolerance Policy**

King Kennedy Community Center and Skeels-Mathews Community Center will never tolerate violence in our programs and/or on our premises. If a child or family member chooses to bring a weapon, with malicious intent to the Centers, they will be expelled immediately! 911 and the police will be called.

#### **Drugs, Alcohol and Smoking Policy**

The use of illegal drugs, controlled substances, recreational drugs, alcohol, and tobacco and other smoking materials is prohibited at the community center. If suspicion of impairment occurs, we will ask you to call a ride service or an emergency contact to pick up you and your child. If you choose to leave with your child, we will call 911 and the police.

## <u>Acknowledgement of Handbook</u>

At the time of program registration, a link is provided to access this handbook. If you would like a hard copy, please talk with your Program Manager.

#### **Hours of Operation**

The Centers will be open with hours of operation as follows:

KKCC Skeels-Mathews

Sunday – Closed Sunday – Closed

Hours are subject to change, and may be altered by previous special arrangement.

#### **Scheduling and Contact Information**

All reservations for the public meeting rooms and gym will be coordinated through the Program Manager. Contact information is as follows:

KKCC Program Manager Skeels-Mathews Community Center Manager

6660 Garfield St. 4378 Skeels Street
Ravenna, Ohio 44266
(P) 330.296.9957
(P) 330.297.0192

## **Request Procedure**

- A. The Program Manager will be the primary authority for making all room reservations. Reservations will be confirmed and placed on the calendar pending approval after receipt of a completed and signed registration form and a non-refundable deposit (if required). Full payment of any fee is due upon approval of the request for use of the Center.
- B. The Program Manager will accept reservations for events first come first serve, to be processed only when complete.
- C. Cancellation of a reservation must be reported 72 hours in advance. Refunds in excess of the nonrefundable deposit will be made only with this advance notice. Failure to cancel or to appear for a reservation may result in forfeiture of room use privileges. If a group or individual owes money for a prior use, then no further reservations will be made until all past bills have been paid.
- D. Groups and individuals wishing to reserve the Center may be required at the discretion of the Center Program Manager to hire additional security for scheduled events. Any requirements will be stipulated at the time of confirmation of reservation. Proof of satisfactory provision of required security will be necessary before users of the Center will be allowed to use the facilities. Failure to provide required security will be regarded as a late cancellation and will lead to all applicable charges for the reservation.

E. For rescheduling, the sponsoring organization is responsible for contacting the Program Manager on the next day of operation. If a satisfactory time is not available, all fees, except the nonrefundable deposit, will be refunded.

#### **Fees and Rent**

Each participant shall complete a reservation form and submit it to the Program Manager. Value of services is \$12.58/hour, and only applies to participants with an Ohio After School Child Enrichment Educational Savings Account Program. Participants who do *not* participate in the Ohio ACE Program will receive services free of charge.

For facility rentals, users shall be responsible for the timely payment of the user fee or rental fee that is assigned. Payment must be received at least fourteen (14) days prior to the reservation date. The check should be made payable to Family & Community Services, Inc.

#### **Liability and Insurance**

Special liability insurance may be required for an event, or rental. The determination of whether an event requires insurance shall be decided by the Program Manager.

# **Cleaning and Maintenance**

The user shall keep the premises in a clean condition. The user shall be responsible for the proper storage and the final collection or ultimate disposal of all garbage and rubbish, all in accordance with the regular municipal collection system. The user shall not permit the premises to be overloaded, damaged, stripped or defaced, nor suffer any waste. The toilets and pipes shall not be used for any purpose other than those for which they were constructed.

#### Security

The user shall be responsible for the safe storage of their furnishings, equipment and possessions.

#### **Parking Facilities**

The parking lot is located to the right of the front entrance (KKCC) and across the street from the front entrance (Skeels).

The handicap-accessible parking lot is located at the entrance of the Community Center, with spaces designated for handicap parking (with plate or sticker).

# Family & Community Services, Inc.

# Community Center Registration

# THIS FORM MUST BE COMPLETED FOR YOUR CHILD TO ATTEND

Child's Name		Age	Grade
Birth Date	Gender M _	F	
Address			Zip
Parent/Legal Guardian's Name			
Address (if different from child)			
Phone		Email	
BE SURE TO KEEP THE CENTER NO EMERGENCY/AUTHOR	<b>EMERGENCY</b>	CONTACTS	
Name		Phone	
Relationship to Child		<u> </u>	
Name		Phone	
Relationship to Child		<u> </u>	
Food or Other Allergies			
Medications			
In consideration of Family & Community Seenrollment of my son/daughter, I hereby reemployees, agents, assistants, and volunte including without limitation, loss or damag and the consequences thereof which may liberate, for the same consideration, I will hagents, assistants and volunteers from any the negligence of my child.	elease and discharg ers from any and all te to personal prope hereafter be sustain nold harmless Famil	e Family & Comi claims, demand erty, personal inj ned as a result of y & Community	munity Services its  Is and liability whatsoever, ury, pain and suffering,  If the sponsored activities.  Services, its employees,
Signature of Parent/Legal Guardian		 Date	

#### **PHOTO RELEASE FORM**

I grant permission to Family & Community Services, Inc. (FCS), and its agents or employees, to use photographs taken of me for the use of FCS's publications such as brochures, newsletters, magazines, display boards, electronic versions of the same publications, on the organization's websites, other electronic forms of media, and for distribution in other publications, electronic or otherwise, without notifying me.

I hereby waive any right to inspect or approve the finished photographs, in printed or electronic form, that may be used in conjunction with them now or in the future, whether that use is known or unknown to me. I also waive any right to royalties or other compensations arising from or related to the use of the photograph.

I hereby agree to release, defend, and hold harmless FCS, and its agents or employees, including any group publishing and/or distributing the finished product, in whole or in part, whether on paper or electronic form, from and against any claims, damages, or liability arising from or related to the use of the photographs. This will include but is not limited to any misuses, distortion, blurring, alteration, optical illusion or use in composite form (either intentionally or otherwise) that may occur or be produced in taking, processing, reduction or production of the finished product, it's publication or distribution.

I am either 18 years of age or older and I am competent to contract in my own name. If I am under 18 years of age, my parent/guardian is competent to contract on my behalf. I have read this release before signing below, and I fully understand the contents, meaning and impact of this release. I understand that I am free to address any specific questions regarding this release by submitting those questions in writing prior to signing, and I agree that my failure to do so will be interpreted as a free and knowledgeable acceptance of the terms of this release.

Name (Please Print)		
Signature	 Date	
Signature of Parent/Guardian (If Necessary)	 	