SERVING INDIVIDUALS WITH DISABILITIES

THERAPEUTIC RECREATION SERVICES

REGISTRATION BEGINS DECEMBER 18, 2019

WINTER 2020 PROGRAM GUIDE

RECREATION

SOCIAL OUTINGS

SPECIAL EVENTS
WELCOME TO COBB COUNTY PARKS DEPARTMENT TRS UNIT!

Therapeutic Recreation Services (TRS) Department provides recreational opportunities for persons with disabilities. The program strives for each participant to function at his or her highest level of ability in the least restrictive environment. The goals of the program are to increase socialization skills, community awareness, and physical and emotional well-being.

Mission: Therapeutic Recreation Services is committed to providing innovative, inclusive, accessible and affordable recreation programs which enhance health, well-being and quality of life for all persons with disabilities including but not limited to: Developmental Disabilities * Learning Disabilities * Physical Disabilities * Hearing/Speech Impairments * Attention Deficit Disorder * Autism/ASP * Pervasive Developmental Disorder * Intellectual Disabilities

ACTIVITY REGISTRATION

REGISTER ONLINE: Log onto www.Cobbparks.org, create an account, scroll through activities, then add to cart. It’s that simple!

REGISTER BY MAIL: Snag a copy of the brochure, fill out the registration page and mail in with a check. Copies of the brochure can also be found online at www.Cobbparks.org. Mailing address is 1885 Roswell Street SE, Smyrna, GA 30080.

REGISTER BY PHONE: Call the main office line at 770-528-2362 and have your activities selection and credit card information handy. We can also help walk you through the registration process!

REGISTER IN PERSON: Windy Hill Community Center is open from 10am-4pm, Monday-Friday. Come by during our office hours and we would be more than happy to get you registered!

Visit us on the web at: www.Cobbparks.org

Become a Cobb County TRS Fan on Facebook

Cobb County...Expect the Best!
Registration—www.Cobbparks.org—December 18, 2019

• You must create a Civic Rec account before you will be able to register for any activities.

• Uses your e-mail address as your login name to sign in and verify your account information, or to create a new Civic Rec account.

Inclement Weather

• If a program is canceled due to weather, the program will be made up at a later date or refunds issued.

Payment Policy

• Full payment of program fees must be included with the registration form. No partial payments will be accepted.

• We now accept MasterCard, American Express, and Visa. You may call in your registration and give your credit card information over the phone or walk-in with your credit card.

• Please do not write your credit card information on your registration form to mail in.

• There will be a $25 fee on any checks returned unpaid by your bank.

Refund Policy

• Refunds will be issued only if TRS has not incurred costs due to purchase of tickets, rentals, supplies, refreshments, deposits, etc. Requests for a refund must be made a minimum of 7 days prior notice from the start date of the class/program. Participants will not receive a refund or credit for any missed special events, social club events or other programs. Social Clubs must be PAID IN FULL. No Exceptions. Refunds will be processed at the end of the quarter.

Non-Resident Policy

• A mandatory fee will be charged to all out-of-county residents participating in Cobb County’s TRS program. The out-of-county fee is 50% of the fee in addition to the program cost.

Volunteers

• Volunteers are needed to assist staff and instructors with the special needs participants in a variety of settings.

◊ Cobb Therapeutic Recreation utilizes many volunteers for their programs.

Transportation (please see specific program information)

ADA Compliance

• The Cobb County Board of Commissioners complies with the Americans With Disabilities Act of 1990 Public Law 101-336 (ADA), which prohibits discrimination on the basis of disability-requiring that no qualified individual with a disability shall on the basis of a disability, be denied the benefits of Cobb County Services, programs, activities, or employment with Cobb County.

• If you have a specific physical or service accessibility need, please make the staff that work with the program/facility which you plan to use, aware of what you need so that we can reasonably accommodate you. Further information can be obtained from the Cobb County Government ADA Coordinator at 770-528-2655 (Voice) or 770-528-1103 (TDD). This notice is available in alternate format - audiotape, computer disk, large print, or Braille. To obtain the alternate form call (770) 528-2655.
Parent/Guardian Responsibilities

- When arriving at or departing from a program, please CHECK-IN with the TRS staff before you leave or take your participant.
- Please contact the TRS office at 770-528-2562, if your participant will be absent from a program.
- Parents/Guardians should be prompt in picking up their participant at the end of the program. Both staff and volunteers would greatly appreciate your cooperation, as they often have additional responsibilities following a program.

Behavior Code of Conduct

- TRS participants are expected to exhibit appropriate behavior at all times. The following guidelines have been developed to help make TRS programs safe and enjoyable for all participants. Additional rules may be developed for the particular programs and athletic leagues as deemed necessary by staff.

  - Participants will:
    - show respect to all participants and staff and follow all directions given by staff.
    - will not use abusive or foul language
    - refrain from causing bodily harm to self, other participants, or staff.
    - show respect for equipment, supplies, and facilities.
    - refrain from smoking or consuming alcoholic beverages during Cobb County events and outings.

Discipline: A positive approach will be used regarding discipline. Staff will periodically review rules with participants during the program session. If inappropriate behavior occurs, prompt resolution will be sought specific to each individual situation. TRS reserves the right to dismiss from the program a participant whose behavior endangers the safety of themselves or others.

The Buddy System: If staff consistently observes disruptive behavior, according to the Code of Conduct, it will be brought to the attention of the parent/guardian. TRS staff will determine if the participant will require a “buddy” to attend future programs. TRS staff will try to assist the parent/guardian in finding a “buddy”, however, it is the responsibility of the parent/guardian to find a partner for the participant in order to continue to attend future programs. When the participant's behavior improves, the TRS staff will assess the progress of the participant to determine if the “buddy” is still needed. If disruptive behavior continues, the participant will be excused from the program. If a “buddy” is needed for a participant, there may be additional costs for them to attend any event(s) - this is the responsibility of the parent or guardian.

Lost and Found: TRS staff is not responsible for personal items that are left at a program. Please help us keep track of your participant’s belongings by labeling all items (including clothing) they bring to programs. Contact TRS to inquire about lost and found items.

Participant Medical Information (PMI): Returning Participants are required to submit a PMI form every year during the spring registration. If at any time information changes, please call TRS or mail an updated form. Forms may be obtained from the TRS office. Any new participant must complete a PMI form before beginning any activities with the TRS Unit.

Dispensing of Medication: If a participant is in need of assistance (other than a reminder) to take prescription medication, a permission form allowing TRS Staff to administer the medication must be completed by the parent or guardian before attending any program. Any medication given to TRS staff needs to be in original container.

Atlanto-axial Dislocation Condition: Individuals with Down Syndrome are at risk of having ADC which allows increased mobility of the first and second neck bones. For the safety of TRS participants, individuals with Down Syndrome will not be allowed to participate in activities such as swimming, gymnastics, aerobics, which could injure the neck area, unless they have a doctor’s excuse stating they are free of ADC. An x-ray by a doctor is necessary to detect if the condition is present.

All activities, prices, dates and times are subject to change.
<table>
<thead>
<tr>
<th>JANUARY</th>
</tr>
</thead>
</table>
| **Cirque du Soleil VOLTA**  
Witness the cinematic music, colorful costumes,  
and awe-inspiring acts of Cirque du Soleil's VOLTA  
**Date:** January 5  
**Time:** 10am-5pm  
**Meet @:** Windy Hill CC  
**Cost:** $68  
*Bring additional money for lunch*  
   |  |  |  |  |
| **Honda Battle of the Bands**  
Watch the Top 8 HBCU marching bands perform hits from today and yesterday  
**Date:** January 25  
**Time:** 1pm-6pm  
**Meet @:** Windy Hill CC  
**Cost:** $39  
*Bring additional money for snacks*  
   |  |  |  |  |
| **Gladiators Game**  
Cheer on the Gladiators as they beat the puck out of the Utah Grizzlies!  
**Date:** January 29  
**Time:** 6pm-11 pm  
**Meet @:** Windy Hill CC  
**Cost:** $24  
*Bring additional money for snacks*  
   |  |  |  |  |

<table>
<thead>
<tr>
<th>FEBRUARY</th>
</tr>
</thead>
</table>
| **Super Bowl Party**  
Join your friends to watch the first Super Bowl of the new decade while munchin' on wings and things!  
**Date:** February 2  
**Time:** 5:30pm-11pm  
or until game ends  
**Meet @:** Varner's Restaurant  
**Cost:** $15  
*includes refreshments*  
   |  |  |  |  |
| **Valentine's Dance**  
Love is in the air, dance the night away!  
**Date:** February 7  
**Time:** 7pm-9pm  
**Location:** Windy Hill CC  
**Cost:** $10  
*includes light refreshments*  
   |  |  |  |  |
| **St. Patrick's Day Dance**  
Feelin' the "Luck O' the Irish?" Dance to your favorite tunes with friends. Wear something GREEN or be SORRY!  
**Date:** March 13  
**Time:** 7pm-9 pm  
**Location:** Windy Hill CC  
**Cost:** $10  
*includes light refreshments*  
   |  |  |  |  |

<table>
<thead>
<tr>
<th>MARCH</th>
</tr>
</thead>
</table>
| **Universoul Circus**  
The circus is in town! Check out acrobats, music, clowns, and animals at the Universoul Circus!  
**Date:** March TBD  
**Time:** 5 pm-11pm  
**Meet @:** Windy Hill CC  
**Cost:** TBD  
   |  |  |  |  |
| **Black Violin Concert**  
Come listen to an updated version of classical music!  
**Date:** March 20  
**Time:** 6pm-10pm  
**Location:** Cobb Energy Center  
**Cost:** $42  
*Bring additional money for snacks*  
   |  |  |  |  |

*Indicates walking-intensive activity*
Bowling

Dates: January 30–March 12
Time: 2pm-4pm
Location: BOWlero
2750 Austell Rd | Marietta, GA 30008
Cost: $30.00 per session
Registration #: 12837
Contact: Ann, 770-528-2570

NO OUTSIDE FOOD OR DRINK ALLOWED!

Contact: Ann, 770-528-2570

Yoga Classes

Date: February 3–March 6
Time: 7pm-8pm
Location: Fullers Rec Center
Cost: $30.00 per session
Registration #: 12837

Contact: Ann, 770-528-2570

Monday Night BINGO

*Meets every 2nd, 3rd, and 4th Monday
Time: 6:00pm-7:30pm
Location: Windy Hill CC
Cost: $10.00
Registration #: 12836

*Will not meet January 20

Contact: Kassandra, 770-528-2569

Basketball & Volleyball

Meets each Wednesday
January 8–March 25*
Time: 2pm-3pm
Location: Meet at Ward Rec Center
IF YOU NEED Transportation:
Meet at Windy Hill CC at 1pm – 4pm
Cost: FREE
Registration #: 12902
*Will not meet on March 11 or March 18
Contact: Kassandra, 770-528-2569

STOP!
We are looking for participants for the following:

#12844 Ballroom & Line Dancing
#12847 Drama Club

#12846 Chorus & Musical Instruments Club
#12848 Fashion Show/Talent Show

PLEASE NOTE: These events will be planned ONLY if there is a sizeable interest!
Social Clubs are designed to EMPOWER individuals with disabilities through unique recreational opportunities in the community. These groups emphasize the importance of leisure awareness, community integration and development of social skills to lead individuals to the highest level of INDEPENDENCE.

Fees for Social Clubs are on a quarterly (seasonal) basis at $45 per quarter for three or more activities.
The Ambassadors day Program is a community-based “bridge” transition program that provides educational, vocational, recreation and leisure opportunities for adults with a mild to moderate intellectual disabilities. Participants are exposed to variety of activities that allow for development of life skills, social skills and recreational interests. The ultimate goal of the program is guide participants to maximize independence and fully integrate into the community.

The day program operates Monday-Friday from 9:00am-4:00pm. The cost is $100 per week, or $20 per day PRE-REGISTRATION. The DROP-IN rate is $25 per day. Various fieldtrips will have an additional fee. Those interested must go through an assessment process and meet eligibility criteria before being admitted to the program.

Activities Offered:
- SEWING
- TENNIS
- GARDENING
- ARTS & CRAFTS
- COOKING

JANUARY 9, 16 & 23
MARCH 19 & 26

BOWLING
January 30-March 12

weekly outings

January
- January 7 #12868 Main Event — $19
- January 14 #12869 Millennium Gate Museum — $15
- January 21 #12870 Paint & Party @ WHCC — $12
- January 28 #12871 Chamberlain’s Chocolate Factory — $27
Contact: Kassandra, 770-528-2569

February
- February 4 #12880 Ceramics @ The Art Place — $7
- February 11 #12881 Cabbagetown & Historic Oakland Cemetery tour Lunch at Ria’s Bluebird Café — $20
- February 18 #12882 Callanwolde Fine Arts Center — $10
- February 25 #12883 APEX Museum — $10
Contact: Ann, 770-528-2570

March
- March 3 #12872 Mary Mac’s Tea Room — $18
- March 10 #12873 Tellus Science Museum — $19
- March 18 (Wednesday Trip) #12874 ArtsKSU — $2
- March 24 #12875 William Root House Museum & Garden — $8
- March 31 #12876 Spelman & Morehouse Campus Tour — FREE
Contact: Kassandra, 770-528-2569
<table>
<thead>
<tr>
<th>MONDAYS</th>
<th>TUESDAYS</th>
<th>WEDNESDAYS</th>
<th>THURSDAYS</th>
<th>FRIDAYS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gardening/Exercise 9am-10am</td>
<td>Conversation Café/Current Events 9am-10am</td>
<td>Gardening/Exercise 9am-10am</td>
<td>Conversation Café/Current Events 9am-10am</td>
<td>Gardening/Exercise 9am-10am</td>
</tr>
<tr>
<td>Wii Dance/Exercise 10am-11am</td>
<td>Field Trip 10am-11am</td>
<td>Tennis 10am-11am</td>
<td>Cooking Class 10am-11am</td>
<td>Exercise 10-11am</td>
</tr>
<tr>
<td>Movie Monday 11am-12pm</td>
<td>Field Trip 11am-12pm</td>
<td>Sewing 11am-12pm</td>
<td>Cooking Class 11am-12pm</td>
<td>Library 11am-12pm</td>
</tr>
<tr>
<td>Lunch/Movie Monday 12pm-1pm</td>
<td>Lunch @ Field Trip Site 12pm-1pm</td>
<td>Lunch 12pm-1pm</td>
<td>Lunch 12pm-1pm</td>
<td>Lunch 12pm-1pm</td>
</tr>
<tr>
<td>Community Outreach 1pm-2pm</td>
<td>Field Trip 1pm-2pm</td>
<td>Basketball/Volleyball 1pm-2pm</td>
<td>Arts &amp; Crafts 1pm-2pm</td>
<td>Outdoor Activities 1pm-2pm</td>
</tr>
<tr>
<td>Ambassador’s Choice Activity 2pm-3pm</td>
<td>Return to WHCC 2pm-3pm</td>
<td>Basketball/Volleyball 2pm-3pm</td>
<td>Life Skills/Bowling (starting January 30th) 2pm-3pm</td>
<td>Ambassador’s Choice 2pm-3pm</td>
</tr>
<tr>
<td>Indoor Games 3pm-4pm</td>
<td>Library 3pm-4pm</td>
<td>Gym Time/Return to WHCC 3pm-4pm</td>
<td>Life Skills/Bowling (starting January 30th) 3pm-4pm</td>
<td>End of Week Cleanup/Ambassadors Choice 3pm-4pm</td>
</tr>
</tbody>
</table>

PLEASE NOTE: Activities are subject to change due to community involvement.
<table>
<thead>
<tr>
<th>SUN</th>
<th>MON</th>
<th>TUES</th>
<th>WED</th>
<th>THUR</th>
<th>FRI</th>
<th>SAT</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>6</td>
<td>7</td>
<td>8</td>
<td>9</td>
<td>10</td>
<td>11</td>
</tr>
</tbody>
</table>
| **Cirque du Soleil**  
**VOLTA**  
10am-5pm | **THRASHERS & BLUE JAYS**  
Life Univ Basketball v. Campbell U  
7pm-11pm | **AMBASSADORS**  
Main Event | Basketball & Volleyball  
2pm-3pm |     |     |     |
|     |     |      | 12  | 13   | 14  | 15  |
|     |     |      |     | **AMBASSADORS**  
Millennium Gate Museum  
**BLUE JAYS** Bowling  
6:00pm-9:00pm | Basketball & Volleyball  
2pm-3pm | **CARDINALS**  
Life Univ Basketball v. Georgetown | **Winter Wonderland**  
at Fernbank Museum  
1pm-5pm |
| 16  | 17  | 18   |     | 19   | 20  | 21  |
|     |     |      |     | **Dr. Martin Luther King Day**  
**WHCC Closed** |     |     |
| 22  | 23  | 24   | 25  | 26   | 27  | 28  |
|     |     |      |     | **Bingo**  
6pm-7:30pm |     |     |
|     |     |      |     | **AMBASSADORS**  
Paint & Party  
**THRASHERS** Bowling  
6:00pm-9:00pm | Basketball & Volleyball  
2pm-3pm | **Honda Battle of the Bands**  
1pm-6pm |
| 29  | 30  | 31   |     |      |     |     |
|     |     |      |     | **Bingo**  
6pm-7:30pm | **AMBASSADORS**  
Chamberlain's Chocolate Factory  
**CARDINALS** Bowling  
6:00pm-9:00pm | Basketball & Volleyball  
2pm-3pm  
**Gladiators Game**  
6pm-11pm  
**Bowling**  
2pm-4pm |     |
<table>
<thead>
<tr>
<th>SUN</th>
<th>MON</th>
<th>TUES</th>
<th>WED</th>
<th>THUR</th>
<th>FRI</th>
<th>SAT</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
<td>8</td>
</tr>
<tr>
<td><strong>Super Bowl Party</strong>&lt;br&gt;5:30-11pm</td>
<td><strong>Yoga</strong>&lt;br&gt;7pm-8pm</td>
<td><strong>AMBASSADORS Ceramics</strong>&lt;br&gt;<strong>BLUE JAYS</strong> Valentine’s Craft 6:30pm-8:00pm</td>
<td><strong>Basketball &amp; Volleyball</strong> 2pm-3pm</td>
<td><strong>Bowling</strong> 2pm-4pm</td>
<td><strong>Valentine’s Dance</strong> 7pm-9pm</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>10</td>
<td>11</td>
<td>12</td>
<td>13</td>
<td>14</td>
<td>15</td>
</tr>
<tr>
<td><strong>Bingo</strong>&lt;br&gt;6pm-7:30pm</td>
<td><strong>Yoga</strong>&lt;br&gt;7pm-8pm</td>
<td><strong>AMBASSADORS Cabbagetown &amp; Historical Oakland Cemetery Tour</strong>&lt;br&gt;<strong>THRASHERS</strong> Valentine’s Craft 6:30pm-8:00pm</td>
<td><strong>Basketball &amp; Volleyball</strong> 2pm-3pm</td>
<td><strong>Bowling</strong> 2pm-4pm</td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>17</td>
<td>18</td>
<td>19</td>
<td>20</td>
<td>21</td>
<td>22</td>
</tr>
<tr>
<td><strong>Bingo</strong>&lt;br&gt;6pm-7:30pm</td>
<td><strong>Yoga</strong>&lt;br&gt;7pm-8pm</td>
<td><strong>AMBASSADORS Callanwolde Fine Arts Center</strong>&lt;br&gt;<strong>BLUE JAYS</strong> DIY Mardi Gras Waffles 6pm-8pm</td>
<td><strong>Basketball &amp; Volleyball</strong> 2pm-3pm</td>
<td><strong>Bowling</strong> 2pm-4pm</td>
<td><strong>STEM-azing</strong> 1pm-3pm</td>
<td></td>
</tr>
<tr>
<td>23</td>
<td>24</td>
<td>25</td>
<td>26</td>
<td>27</td>
<td>28</td>
<td>29</td>
</tr>
<tr>
<td><strong>Bingo</strong>&lt;br&gt;6pm-7:30pm</td>
<td><strong>Yoga</strong>&lt;br&gt;7pm-8pm</td>
<td><strong>AMBASSADORS APEX Museum</strong>&lt;br&gt;<strong>THRASHERS</strong> DIY Mardi Gras Waffles 6pm-8pm</td>
<td><strong>Basketball &amp; Volleyball</strong> 2pm-3pm</td>
<td><strong>Bowling</strong> 2pm-4pm</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

February 2020
<table>
<thead>
<tr>
<th>SUN</th>
<th>MON</th>
<th>TUES</th>
<th>WED</th>
<th>THUR</th>
<th>FRI</th>
<th>SAT</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
</tr>
<tr>
<td><strong>Yoga</strong></td>
<td><strong>AMBASSADORS</strong> Mary Mac’s Tea Room</td>
<td><strong>Basketball &amp; Volleyball</strong> 2pm-3pm</td>
<td><strong>Bowling</strong> 2pm-4pm</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>9</td>
<td>10</td>
<td>11</td>
<td>12</td>
<td>13</td>
<td>14</td>
</tr>
<tr>
<td><strong>Bingo</strong> 6pm-7:30pm</td>
<td><strong>AMBASSADORS</strong> Tellus Science Museum</td>
<td></td>
<td><strong>Bowling</strong> 2pm-4pm</td>
<td><strong>St. Patrick’s Dance</strong> 7-9pm</td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>16</td>
<td>17</td>
<td>18</td>
<td>19</td>
<td>20</td>
<td>21</td>
</tr>
<tr>
<td><strong>Bingo</strong> 6pm-7:30pm</td>
<td><strong>THRASHERS</strong> Movie Outing 6pm-10pm</td>
<td><strong>AMBASSADORS</strong> ArtsKSU</td>
<td><strong>CARDINALS</strong> Dine Out 6:30pm-8:30pm</td>
<td><strong>Black Violin Concert</strong> 6pm-10pm</td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>23</td>
<td>24</td>
<td>25</td>
<td>26</td>
<td>27</td>
<td>28</td>
</tr>
<tr>
<td><strong>Bingo</strong> 6pm-7:30pm</td>
<td><strong>AMBASSADORS</strong> William Root House Museum &amp; Garden <strong>BLUE JAYS</strong> Movie Outing 6pm-10pm</td>
<td><strong>Basketball &amp; Volleyball</strong> 2pm-3pm</td>
<td><strong>THRASHERS</strong> Dine Out 6:30pm-8:30pm</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>29</td>
<td>30</td>
<td>31</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>AMBASSADORS</strong> Spelman &amp; Morehouse Campus Tour</td>
<td><strong>CARDINALS</strong> Movie Outing 6pm-10pm</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
This form will expire in two years. Date__________________________

It is imperative that you notify us of any changes in condition or medications during the year. If registering more than one participant, please complete an additional form for each registrant. This form must be completely filled out and on file in our office before we will register the participant.

<table>
<thead>
<tr>
<th>Participant Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Participant’s Name</td>
</tr>
<tr>
<td>(Last)</td>
</tr>
<tr>
<td>(First)</td>
</tr>
<tr>
<td>Birthdate:</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Participant’s Residence Address</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>City</td>
</tr>
<tr>
<td>Zip</td>
</tr>
<tr>
<td>Home #(____)</td>
</tr>
<tr>
<td>Work #(____)</td>
</tr>
<tr>
<td>Female ___ Male ___</td>
</tr>
<tr>
<td>Age ___ Birth date ___</td>
</tr>
<tr>
<td>Participant e-mail</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Caregiver Name</td>
</tr>
<tr>
<td>Office #(____)</td>
</tr>
<tr>
<td>Cell #(____)</td>
</tr>
<tr>
<td>Parent E-Mail</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Circle All That Apply:</td>
</tr>
<tr>
<td>Mild Intellectual Disability</td>
</tr>
<tr>
<td>Moderate Intellectual Disability</td>
</tr>
<tr>
<td>Severe Intellectual Disability</td>
</tr>
<tr>
<td>Profound Intellectual Disability</td>
</tr>
<tr>
<td>Emotional &amp; Behavioral Disorder</td>
</tr>
<tr>
<td>Specific Learning Disability</td>
</tr>
<tr>
<td>Orthopedic Impairment</td>
</tr>
<tr>
<td>Hearing Impairment</td>
</tr>
<tr>
<td>Autism</td>
</tr>
<tr>
<td>Other Health Impairment</td>
</tr>
<tr>
<td>Visual Impairment</td>
</tr>
<tr>
<td>Speech-Language Impairment</td>
</tr>
<tr>
<td>Traumatic Brain Injury</td>
</tr>
<tr>
<td>Autism Spectrum</td>
</tr>
<tr>
<td>Pervasive Developmental Delay</td>
</tr>
<tr>
<td>Attention Deficit/Hyperactivity Disorder</td>
</tr>
<tr>
<td>Attention Deficit Disorder</td>
</tr>
<tr>
<td>Fragile X Syndrome</td>
</tr>
<tr>
<td>Other medical condition(s) ____________________________</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Parent/Guardian Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mother’s Name</td>
</tr>
<tr>
<td>Father’s Name</td>
</tr>
<tr>
<td>Address (if different from above)</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Mother’s Home Phone (____)</td>
</tr>
<tr>
<td>Work Phone (____)</td>
</tr>
<tr>
<td>Cell Phone(____)</td>
</tr>
<tr>
<td>Father’s Home Phone (____)</td>
</tr>
<tr>
<td>Work Phone (____)</td>
</tr>
<tr>
<td>Cell Phone(____)</td>
</tr>
<tr>
<td>Alternate Emergency Contact</td>
</tr>
<tr>
<td>Relationship to Participant</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Home Phone (____)</td>
</tr>
<tr>
<td>Work Phone (____)</td>
</tr>
<tr>
<td>Cell Phone(____)</td>
</tr>
</tbody>
</table>

PARTICIPANT INFORMATION:

Please check or circle the correct response, complete each category and list any other information you feel Cobb County PARKS should be aware of to provide safe and enjoyable activities for the individual being registered.

MEDICAL CONDITIONS: Diabetes Shunts Braces/Canes/Walker Hearing Aid Ear Tubes Needs Interpreter Glasses Wheelchair (type) Non-Verbal Communication Allergies (specific) Other ____________________________

SEIZURES: Yes ___ No ___ Epilepsy Yes ___ No ___ Seizures controlled by medication? Yes ___ No ___ Date of last seizure: ______________ Type of seizure and treatment desired: ____________________________

MEDICATION: Type, Dosage/Time ____________________________ Type, Dosage/Time ____________________________

Comments

For participants needing more assistance than a reminder to take prescribed medication, please check. A permission form must be obtained, signed and returned to Cobb County PARKS in order for staff to assist. Contact Cobb County PARKS/TRS Unit to obtain a form.

DOCTOR’S NAME: ____________________________ PHONE: ____________________________
SAFETY: Cobb County PARKS is committed to conducting programs with the utmost safety and concern for participants. Those registering for programs must recognize, however, that there are potential risks of injury when participating in recreation programs. Cobb County PARKS continually strives to reduce such risks and provides safety rules and instructions to protect participants.

INSURANCE: Cobb County PARKS carries liability insurance only. The cost of medical insurance coverage for injuries would make program fees prohibitive, therefore it is the responsibility of each individual or family to provide their own medical insurance. Cobb County PARKS must have the following information, however, in case of an emergency.

Medical Insurance Company ____________________________ Policy # _______________________

Cobb County PARKS provides an approximate 1:4 staff to participant ratio. You may be required to provide appropriate supervision to participant you are registering for TRS programs. Please note if participant requires a closer ratio and why.

Inappropriate Activities:
Please indicate under what circumstances, if any, participant may be without leader supervision (i.e. to leave for home on own, etc.)

IS A BUS AIDE REQUIRED? Yes ____ No ____ If yes, explain why: ________________________

SWIM INFORMATION: Beginner ____ Advanced Beginner ____ Intermediate ____ Advanced ____ Diving ____

TOILETING ASSISTANCE: Yes ____ No ____ If yes, explain why: ________________________

Permission for Cobb County PARKS to contact school/workshop staff concerning the participant’s needs: Yes ____ No ____

OTHER INFORMATION WE MAY FIND HELPFUL TO KNOW: ________________________________

Photo permission for Cobb County PARKS publicity purposes: Yes ____ No ____.

RELEASE AND HOLD HARMLESS AGREEMENT

PERMISSION TO PROVIDE EMERGENCY MEDICAL TREATMENT

Realizing the nature of this program, its physical demands and how important it is to follow rules, regulations, and instructions outlined by the staff of the Cobb County PARKS I am, to the best of my knowledge, in good health and able to participate in the program.

I authorize the staff of the Cobb County PARKS to organize any required medical or first aid procedure, or to take the undersigned to a hospital emergency room for treatment. If any major treatment is required, I understand that every effort will be made to notify the individual indicated as emergency contact beforehand by telephone.

The undersigned hereby forever releases, discharges, and covenants to hold harmless Cobb County PARKS, Cobb County Recreation Commission, Cobb Arts Commission, Cobb County Board of Commissioners and Cobb County, Georgia, and any other person, firm, corporation charged or chargeable with responsibility or liability, their heirs, administrators, executors, successors and assignees from any and all claims, demands, damages, costs, expenses, loss of services, actions and causes of action belonging to the undersigned or arising out of any act or occurrence in connection and particularly on account of all personal injury, disability, property damage, loss or damages of any kind sustained or that may hereafter be sustained arising out of the matters described herein or in consequence of the participation in the recreation program sponsored by the Cobb County PARKS. The undersigned hereby bind their heirs, administrators, executors and successors. Further, this agreement shall apply to all unknown and unanticipated injuries and damages directly or indirectly resulting here-from. This Release and Hold Harmless Agreement shall constitute a full and complete release of any and all claims.

DATE: ___________________ BY: ____________________________ (Signature of Participant)

DATE: ___________________ BY: ____________________________ (Parent or Guardian)

NOTE: Signature of participant and parent/guardian are both required if participant is under age 19, or is registered for a program for the mentally or physically disabled, or other special population member.

In order that the Department assures compliance with ADA (American with Disabilities Act), if you have a specific physical or service accessibility need, please make the staff who work with the program/facilities aware so that we can reasonably accommodate your need.
VOLUNTEERS NEEDED!

Our volunteers are a very valuable part of our program. If you are interested in helping with our current programming, please complete this form and return to Ann Bonds at: ann.bonds@cobbcounty.org

*Background checks and general orientation must be completed prior to volunteering.*

Name:____________________________ Date of Birth:______________
Address:____________________________________________________
City:________________________ State:_______ Zip Code:_________
Employer:________________________________ Phone:______________
Email:_______________________________________________________
Home Phone: ___________________ Cell Phone:____________________

AREAS OF INTEREST

SPECIAL EVENTS:
Cirque du Soleil VOLTA____ Winter Wonderland at Fernbank Museum____
Honda Battle of the Bands____
Gladiators Game____
Super Bowl Party____
Valentine’s Day Dance____
STEM-azing____
Hawks Game____
UniverSoul Circus____
St. Patrick’s Day Dance____
Black Violin Concert____

SOCIAL CLUBS:
East Cobb Cardinals____
West Cobb Blue Jays____
South Cobb Thrashers____

ACTIVITIES:
Yoga____
Bowling ____
Bingo____
Basketball & Volleyball____

We are counting on YOU!

Please confirm the week prior to your chosen volunteer service that you will attend. If you cannot attend an event that you have signed up to volunteer for, please notify our office as quickly as possible at (770) 528-2562 so that other volunteers may be arranged.

THANK YOU!
TRS Winter 2020 REGISTRATION FORM
Registration begins December 18, 2019
1885 Roswell Street SE | Smyrna, GA 30080

Participant Full Name________________________________Birthdate___________________
Participant Residence Address__________________________________________________
City________________ State_________ Zip_________ County________________
Mother Home # _______________ Mother Work # _______________ Mother Cell # _______________
Father Home # _______________ Father Work # _______________ Father Cell # _______________
Parent Residence Address_______________________________________________________
Caregiver Name/ Cell #_________________________________________________________
Alternate Emergency Contact Name/Cell#__________________________________________
Do you pay city property taxes? (circle one) Y or N
When provided, does participant require wheelchair accessible transportation? (circle one) Y or N

SPECIAL EVENTS
#12861 Winter Wonderland at Fernbank Museum____
#12862 Football at The Georgia Dome____
#12863 Cirque du Soleil VOLTA____
#12864 Honda Battle of the Bands____
#12865 Gladiators Game____
#12866 Super Bowl Party____
#12867 Valentine’s Dance____
#12868 STEM-azing____
#12869 Hawks Game____
#12870 UniverSoul Circus____
#12871 St. Patrick’s Day Dance____
#12872 Black Violin Concert____

TALENT OPPORTUNITIES
#12873 Hawks Game____
#12874 UniverSoul Circus____
#12875 St. Patrick’s Day Dance____
#12876 Black Violin Concert____

AMBASSADORS TRIPS
#12868 Main Event ___
#12869 Millennium Gate Museum ___
#12870 Paint & Party ___
#12871 Chamberlain’s Chocolate Factory ___
#12880 Ceramics @ Art Place ___
#12881 Cabbagetown & Oakland Cemetery Tour ___
#12882 Callanwolde Fine Arts Center ___
#12883 APEX Museum ___
#12884 Mary Mac’s Tea Room ___
#12885 Tellus Science Museum ___
#12886 ArtsKSU ___
#12887 William Root House ___
#12888 Spelman/Morehouse Campus Tour ___

SOCIAL CLUBS- $45 for Winter Quarter
#12877 East Cobb Cardinals ______
#12878 West Cobb Blue Jays ______
#12879 South Cobb Thrashers ______
#12880 Callanwolde Fine Arts Center ___
#12881 APEX Museum ___
#12882 Mary Mac’s Tea Room ___
#12883 Tellus Science Museum ___
#12884 ArtsKSU ___
#12885 William Root House ___
#12886 Spelman/Morehouse Campus Tour ___

ACTIVITIES
#12875 William Root House ___
#12876 Spelman/Morehouse Campus Tour ___
#12877 East Cobb Cardinals ______
#12878 West Cobb Blue Jays ______
#12879 South Cobb Thrashers ______
#12880 Callanwolde Fine Arts Center ___
#12881 APEX Museum ___
#12882 Mary Mac’s Tea Room ___
#12883 Tellus Science Museum ___
#12884 ArtsKSU ___
#12885 William Root House ___
#12886 Spelman/Morehouse Campus Tour ___

REGISTRATION POLICIES & PROCEDURES

• Online registration is available on our website: www.Cobbparks.org
• Payment Policy: Full payment of program fees must be included with the registration form. No partial payments will be accepted. We now accept MasterCard, American Express, & Visa. Please do not write your credit card number on the registration form to mail in. Credit card payments must be done online, in person or over the phone. Make checks and money orders payable to Cobb County PARKS and put driver’s license number on your check. THERE WILL BE A $25 FEE ON ANY CHECKS RETURNED UNPAID BY YOUR BANK.
• Non-Resident Policy: A mandatory non-resident fee will be charged to all out-of-county residents participating in this Cobb County program.
• Refund Policy: Refunds will be issued only if TRS has not incurred costs due to purchase of tickets, rentals, supplies, refreshments, deposits, etc. Refund requests must be made in writing a minimum of 5 work days before the program. Participants will not receive a refund or credit for any missed special events, social club events or other programs. Social Clubs and all TRS special events or classes must be PAID IN FULL. No Exceptions. Refunds will be processed at the end of the quarter.
• Inclement Weather: If a program is canceled by the department due to weather, the program will be made up at a later date or refunds issued.

FOR STAFF USE ONLY

Name on Receipt_______________________________ Total Amt. Paid $______ Check #______ MC/Visa Authorization Code #______
Staff Initials _______ Date____________________