



Rules, Registration and Permission After Hours Teen Center

Friday Nights - 7:00 to 9:30 p.m.

CASCADES LIBRARY

21030 Whitfield Place, Potomac Falls VA 20165

PROGRAM OVERVIEW

- **After Hours Teen Center (AHTC) is for 7th-12th grade students only.**
- **Teens must arrive between 7:00 p.m. and 7:30 p.m. Late arrivals will be denied entry.**
- **Permission forms are required. A parent/guardian must be present for registration.**
- **Parents/guardians must keep phone number(s) and contact information up to date.**
- **No outside food or drinks permitted. Pizza and water are provided.**
- **Teens requiring transportation MUST be picked up by 10 p.m. Teens without transportation after 10 p.m. will be denied entry the following week.**
- **If picking up prior to 9:30 p.m., parents/guardians/designees must come into the library.**
- **Teens not requiring transportation may leave at 9:30 p.m. Loudoun County Public Library is not responsible for their safety after they exit the facility.**
- **AHTC follows Loudoun County Public Schools Inclement Weather Closing schedule.**

AHTC RULES OF CONDUCT

Violation of AHTC rules may result in exclusion from the program

- Teens must be respectful to other teens, library staff, security personnel, presenters, and volunteers.
- Verbally or physically threatening/harassing others is strictly prohibited. Teens violating this rule may be banned from the program and possibly face criminal prosecution.
- Inappropriate language and attire are prohibited. Shoes must be worn at all times. Appropriate language and attire are determined solely by the library staff.
- Teens must follow the instructions of library staff and security personnel at all times.
- Teens are responsible for their own property and are encouraged to leave valuables at home.
- **No bags of any kind are allowed except for teens with medical exceptions.**

Please print neatly and include all information or indicate N/A.

The information on this form will expire one year from today's date. You will be asked to update the information that is on file before your teen returns to the After Hours Teen Center.

Student Full Name	Date of Birth	Expected HS Grad Date	Grade
School Name	Known Medical Concerns		
Parent/Guardian #1	Phone	Alternate Phone	
Home Address: Street, Apt	City	State	Zip
Email Address			
Parent/Guardian #2	Phone	Alternate Phone	
Home Address: Street, Apt	City	State	Zip
Email Address			
Additional Emergency Contact	Phone	Alternate Phone	
Relationship			

I have read and understand the rules and regulations and agree to abide by them. **I understand that failure to comply with After Hours Teen Center rules could result in disciplinary action including being asked to leave and/or future exclusion from the program.**

Student Full Name (Printed)	Student Signature	Today's Date
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I have reviewed these rules and regulations with my son/daughter. **I understand that failure to comply with After Hours Teen Center rules could result in disciplinary action including being asked to leave and/or future exclusion from the program.**

In addition: *I agree to keep After Hours Teen Center staff informed of my current phone number(s) and other contact information.*

Parent/Guardian Full Name (Printed)	Parent/Guardian Signature	Today's Date
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