



# Summer Learning 2020 Community Connection K-Grade 4 Afternoon Programs



Tuesday, June 9-July 16 - Monday through Thursday  
1:00-4:00 PM with supervision following free lunch  
No programs on Fridays

## LOCATIONS:

**G.D. Jones Elementary: 1018 South 12th Avenue, Wausau WI 54401 - 715-261-0950**

G.D. Jones and South Mountain Elementary students will attend G.D. Jones Elementary Summer Learning

**Hawthorn Hills Elementary: 1600 Kickbusch Street, Wausau WI 54403 - 715-261-0045**

Hawthorn Hills and John Marshall Elementary students will attend Hawthorn Hills Elementary Summer Learning

**Lincoln Elementary: 720 South 6th Avenue, Wausau WI 54401 - 715-261-0965**

Grant, Lincoln, and Rib Mountain Elementary students will attend Lincoln Elementary Summer Learning

**Riverview Elementary: 4303 Troy Street, Wausau WI 54403 - 715-261-0030**

Franklin, Hewitt-Texas, and Riverview Elementary students will attend Riverview Elementary Summer Learning

**Thomas Jefferson Elementary: 500 West Randolph Street, Wausau WI 54401 - 715-261-0175**

Maine, Stettin, and Thomas Jefferson Elementary students will attend Thomas Jefferson Elementary Summer Learning

**What is the Community Connection Program?** Community Connection provides full-day learning opportunities for your children during summer learning by offering afternoon enrichment programs at each of the elementary summer learning sites. These programs are offered in partnership with community agencies such as 4-H, Woodson Art Museum, Boys and Girls Club of the Wausau Area, Parks and Recreation Department, Monk Botanical Gardens, and many more! Programs begin at 1:00 PM after students have a free lunch and conclude at 4:00 PM. This program is designed as a 6-week comprehensive package and is not intended for those seeking a limited number of days and/or weeks. Participants must be enrolled in the morning Summer Learning Program to attend. Programming by community agencies will rotate throughout the sites. Programming by the Parks and Recreation Department is limited to Riverview and Thomas Jefferson.

**Who can participate in the program?** This program is for students currently in kindergarten through grade 4 (2019-2020 school year).

**Why is there a lottery for this program?** Often, the number of registrations exceeds slots available. Each site can serve a maximum of 60 students. Registration and payment must be received by April 17, 2020, to be included in the lottery. Siblings will be kept together for the lottery. Once slots have been filled, students will be placed on a waiting list in the order their names were drawn. You will receive confirmation of acceptance in the program or placement on a waiting list by May 8, 2020. If you do not receive confirmation, please call the G2M office at 715-261-0580.

**What is the cost of Community Connection?** The cost for Community Connection is \$40 per student; however, if enrolling three or more children per family, the maximum fee is \$100. For students qualifying for free or reduced lunch the reduced cost is \$10 per student. If you register and pay online and do not receive a slot in a program, your credit or debit card will automatically be refunded. If you are unable to pay online, payment must be received by April 17, 2020, to be included in the lottery. If you do not receive a slot, you will receive a refund after July 16, 2020. Online registration and payment are preferred and we are most willing to assist you in this process.

## HOW TO REGISTER:

- Register online at <https://Wausau.revtrak.net> OR
- Complete the paper registration form (reverse side) and return with payment to your child's school or mail to: Summer Learning, Longfellow Administration Center, 415 Seymour Street, P.O. Box 359, Wausau WI 54402-0359
- Registration deadline April 17, 2020, to be included in lottery and look for confirmation of slot by May 8, 2020

The Wausau School District does not discriminate against individuals on the basis of sex, race, religion, national origin, ancestry, creed, pregnancy, marital or parental status, sexual orientation, or physical, mental, emotional, or learning disability. Federal law prohibits discrimination in education and employment on the basis of age, race, color, national origin, sex, religion, or disability.

Please complete reverse side

February 2020



# Community Connection Enrollment Form

Complete and return with payment to your child's school  
by April 17, 2020, ONLY if you have not registered online.

Today's Date \_\_\_\_\_ Teacher Recommendation Signature \_\_\_\_\_

## ■ STUDENT INFORMATION

Child's Full Legal Name (last, first, middle) \_\_\_\_\_ Date of Birth \_\_\_\_\_

Child's Primary Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

2019-2020 Grade \_\_\_\_\_ School Attended During 2019-2020: \_\_\_\_\_

### Check the location your child will attend Summer Learning:

G.D. Jones     Hawthorn Hills     Lincoln     Riverview     Thomas Jefferson

## ■ STUDENT HEALTH INFORMATION

Please check if your child has any of these health conditions:

Asthma     Diabetes     Seizures     Allergies \_\_\_\_\_     Other \_\_\_\_\_

Please check if your child uses an  EpiPen     Inhaler

Does your child require medication during the Summer Learning day?     YES     NO

If YES, please list medications and time to be administered: \_\_\_\_\_

(If any medication must be administered during program hours, please contact site secretary.)

Students with disabilities who need special accommodations to participate in activities should contact the school.

***Emergency Release Information: If I cannot be reached immediately, I authorize Summer Learning staff to call or drive my child to the physician, dentist, or hospital. An ambulance may be called if necessary.***

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

## ■ PARENT/GUARDIAN PERMISSIONS

Please check for your permission:

I give permission for my child to attend field trips during Summer Learning as identified by staff.

I give permission for the District to post, print, or release my child's image/photograph or student work.

I give permission for my child to use Google Apps for Education. Account will be supplied by the District.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

## ■ PARENT/GUARDIAN INFORMATION

Parent/Guardian First and Last Name \_\_\_\_\_

Contact Phone Numbers (home and/or cell) \_\_\_\_\_ Work Phone Number \_\_\_\_\_

Additional Contact First and Last Name \_\_\_\_\_ Contact Phone Number \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_