



Harrison Park SUN Class Form – Fall 2025

Program Dates: **October 20th – December 18th** - Monday-Thursday, 4:00pm - 5:30pm

Return this form, along with your registration form, to the SUN box in the Harrison Park main office or drop off in class 103.

Please mark the classes your student wants to participate in by numbering them in order of interest. We will try to place your students in their preferred activities. Students will receive confirmation letters indicating which classes they will be participating in.

Monday Activities

- ☐ **Basketball**
- ☐ **Dungeons and Dragons**
- ☐ **Gardening Club**
- ☐ **Mandarin Tutoring**

Tuesday Activities

- ☐ **African Students Club (IRCO)**
- ☐ **Co-ed Soccer** (Must be able to participate both Tuesday +Thursday)
- ☐ **Math Tutoring** – Drop-in math tutoring.
- ☐ **Theater Club**

Wednesday Activities

- ☐ **Artist Exploration Class** – Exploring different art mediums based on student interest.
- ☐ **Soccer** - for girls & non-binary students only.
- ☐ **African Students Club (AYCO)**
- ☐ **Music Club** – Keyboard instruction + learning about the history and cultural context of their favorite music.
- ☐ **Pacific Islander Club**
- ☐ **Mandarin Tutoring**

Thursday Activities

- ☐ **P.A.T.H** – “Purpose, Action, Team, Health” – learn to establish a foundation for learning and various skills needed to be successful in school and life.
- ☐ **Co-ed Soccer** (Must be able to participate both Tuesday +Thursday)
- ☐ **Math Tutoring**
- ☐ **Jazz Band** – For intermediate and advanced band students.
- ☐ **Pacific Islander Club**

Please call, text, or email Diana Velador-Gonzalez, HP SUN Manager with any questions.

Phone: 503-442-9962 Email: dianag@irco.org



HARRISON PARK SUN 2025-26

IRCO SUN COMMUNITY SCHOOL REGISTRATION FORM

Student Information

First Name: _____ Last Name: _____

Date of Birth: _____ Gender: _____

Student Grade Level: _____ Teacher: _____

Address: _____ City: _____ Zip: _____

Language(s) Spoken at home: _____

What is your race or origin? Please mark as many boxes as apply:

- ☐ African ☐ Latino/Hispanic ☐ Native Hawaiian/Pacific Islander ☐ White
☐ Asian ☐ Middle Eastern ☐ Native American/Alaskan Native ☐ Decline to answer
☐ Black/African American ☐ Slavic ☐ Other (Please Specify) _____

List any allergies, special medical conditions or medications. *(Please note that SUN staff are not permitted to give children medications of any kind, including inhalers.)*

Parent/Guardian Contact Information:

Parent/Guardian Name: _____ Phone: _____

Email: _____

Parent/Guardian Name: _____ Phone: _____

Email: _____

How would you prefer to be contacted? ___email ___phone call ___text

Transportation

SUN ends at 5:30pm. Please indicate below how your student will be dismissed at the end of the day.

Choose one:

____ Student will wait inside, for pick-up by authorized adult.

Authorized adults (other than listed above): _____

____ Student is released to walk home.



Notice of Non-Discrimination & Behavioral Expectations

SUN Community Schools programs and services reflect the diversity of our community. We do not discriminate on the basis of religion, race, color, gender, national origin, sexual orientation age or disability.

The safety and well-being of all participants and staff is of utmost importance. To ensure safety in SUN Community Schools, we require that all participants be able to follow all three of the following criteria:

- Be age-appropriate for the activity/program.
- Be able to maintain safe behavior during the activity. This means that they can participate without harming themselves or others. Specific required behaviors include:
 - Treating adults and other students with respect
 - Following directions of adult instructors and coordinators
 - Remaining in the assigned room until dismissal
 - Engaging in safe, non-violent behavior
 - Participate meaningfully in the activity and not disrupt or distract others.

If you have questions or concerns about whether your child can follow the behavioral expectations above or whether they will benefit from the program being offered, please talk with the SUN Site Manager at your SUN School.

☐ **I have read the Behavioral Expectations and have discussed any questions or concerns I have with the SUN Site Manager.**

Parent/Guardian consent to participate and waiver

I hereby agree that my child may participate in SUN Community School activities, and release and waive IRCO, its employees, agents and representatives, officers, as well as directors, and partner agencies from any and all liability for any loss or injury sustained or incurred (including any loss or injury resulting from the representatives, officers, and/or directors while my child participates in SUN Community School activities.

By signing below, I have read and understand the consent and waiver statement above.

Parent/Guardian Signature

Date

Comments. Please add any other information that you think would be helpful for us to know to support your student:

Photography

My student may be photographed or videotaped for publicity or news purposes ☐ Yes ☐ No



2025-2026 SUN RELEASE OF STUDENT INFORMATION

Student First & Last Name: _____

Our SUN Community School is in collaboration with Portland Public Schools, Multnomah County, Immigrant and Refugee Community Organization, City of Portland and many other community partners and agencies who come together to support children's success in school and life. We do this by working together to meet the specific needs of our students and their families.

In order to provide your child with the best services and support possible, the SUN Community School Site Manager needs your permission to be able to share information with the people who are teaching and serving your child specifically. This information may include student name, student ID #, grade level, achievement test scores, course grades and grade point averages, attendance, Individual Education Plan, demographic, and behavior/discipline information. The SUN Community School Site Manager will only share this information when it is required by a partner organization or supports your student's success. This information may also be shared with the City/County SUN Initiative and their evaluation contractors for program evaluation.

Organizations receiving information about your student are informed of state and federal confidentiality provisions. This includes employees and volunteers managed by the SUN Community School site manager and staff of other partner agencies providing the activities in which your child participates in. They are not authorized to release information to any agency or person not listed in this release without specific written consent of the parent/legal guardian.

Children may participate in SUN activities whether or not their Parent/Guardian agrees to the release or exchange of educational information to other staff or agencies.

Check box AND sign below:

- ☐ **YES**, I authorize the release and exchange of student information.
☐ **NO**, I do NOT authorize the release and exchange of student information.

Parent/Guardian Signature

Date

This permission is valid from September 1, 2025, until July 31, 2026, unless cancelled in writing.

Harrison Park SUN Community School is a collaboration of Multnomah County Department of Human Services, The City of Portland Parks & Recreation, the Portland Public Schools District and IRCO.

