

THE HUB CLUB



Overview of Hub Club

The Hub Club is an opportunity for parents/caregivers to bring their child to socialize with other children, use some of the equipment and supplies available at the ARCH and as a place to network with other parents/caregivers. There will be two Hub Club sessions offered every other Saturday. Session 1 will run from 12:00-1:30, session 2 will be offered from 2:30-4:00. Although there will be equipment and supplies available for parents/caregivers to use, ARCH staff will not be facilitating any organized activities during Hub Club. The ARCH staff will be available to answer questions or provide assistance if needed, but will not be responsible for supervising any children. Supervision of the child will be the sole responsibility of the parent/caregiver that brings and attends Hub Club with that child.

How to attend Hub Club

Hub Club will be located in designated multi-purpose rooms therefore space is limited and reservations will be required in order to attend. To reserve a date and time to attend Hub Club please call ARCH at 610-573-2500, reservations will begin one week prior to the event. When making a reservation please specify which session you will be attending and how many children/adults will be attending with you. When you arrive at ARCH for Hub Club you will be required to sign in at the front desk and complete a short information sheet. This information sheet will be kept on file for future visits to Hub Club. If your child attends with a different adult (BSC, other family member, etc.), that caregiver must be registered in person by the participant's parent/guardian in person. New caregivers will be expected to show picture identification. ARCH of LV reserves the right to request picture identification from a registered caregiver at anytime.

Rules for Hub Club

1. Parents/caregivers are responsible for supervising their child at all times
2. The Hub Club will be located in the multi-purpose rooms. Participants and caregivers are asked to remain in these designated areas during the Hub Club.
3. Please be respectful to the facility and equipment/supplies. Use the equipment properly and clean up before leaving.
4. There will be specific equipment and supplies available for participants to use during that day, we ask that only this equipment/supplies are used and nothing is moved from other areas of the building.
5. Food and drinks are not permitted in the multi-purpose rooms. Water bottles containing water only will be allowed.
6. Participants and caregivers are expected to be polite and courteous to all others attending Hub Club.

I have been provided with a copy of THE HUB CLUB rules. In reading these rules, I acknowledge that I am responsible for my child's safety at all times and do not hold ARCH of Lehigh Valley/Elwyn or its affiliates responsible for any injury/bodily harm that may be sustained during any Hub Club visit.

Signature

Date

Hub Club Dates

When calling to make a reservation for Hub Club please specify which session you will be attending and how many children/adults will be attending with you.

September 26th

(Reservations will be taken after September 19th)

Session 1- 12:00-1:30

Session 2- 2:30-4:00

October 10th

(Reservations will be taken after October 3rd)

Session 1- 12:00-1:30

Session 2- 2:30-4:00

October 24th

(Reservations will be taken after October 17th)

Session 1- 12:00-1:30

Session 2- 2:30-4:00

November 7th

(Reservations will be taken after October 31st)

Session 1- 12:00-1:30

Session 2- 2:30-4:00

November 21st

(Reservations will be taken after November 14th)

Session 1- 12:00-1:30

Session 2- 2:30-4:00

December 5th

(Reservations will be taken after November 28th)

Session 1- 12:00-1:30

Session 2- 2:30-4:00

December 19th

(Reservations will be taken after December 12th)

Session 1- 12:00-1:30

Session 2- 2:30-4:00

The Hub Club
Membership Form

Name of individual participating in Hub Club Program: _____

Today's Date: _____ DOB: _____

Address: _____

Phone: _____

Parent/Guardian Name: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Pager: _____

Parent/Guardian Name: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Pager: _____

Emergency Contact Name: _____

Relationship: _____

Home Phone: _____ Cell Phone: _____

Please complete the following information on anyone (other than parents/guardians listed on page 1) who will be bringing the member to ARCH of Lehigh Valley. Please remember, only the caregivers on file will be permitted to bring the member to ARCH. ARCH of LV reserves the right to request picture identification at any time. Caregivers may be added or removed by the parents/guardians only and must be done in person.

1. Name: _____

Address: _____

Relationship to member: _____

Home Phone: _____ Cell Phone: _____

Emergency Contact: _____

Phone Number: _____

Agency Name: _____

Agency Phone Number: _____

2. Name: _____

Address: _____

Relationship to member: _____

Home Phone: _____ Cell Phone: _____

Emergency Contact: _____

Phone Number: _____

Agency Name: _____

Agency Phone Number: _____

3. Name: _____

Address: _____

Relationship to member: _____

Home Phone: _____ Cell Phone: _____

Emergency Contact: _____

Phone Number: _____

Agency Name: _____

Agency Phone Number: _____