

Computer Survival Skills for Kids at Palos Verdes Annex

Kids today are required to use Microsoft Word, PowerPoint, Excel and have typing skills that will allow them to create school projects. PVNET/Annex has designed a new class geared at 2nd-5th graders that will give them the skills to be confident in the classroom and at home. Summer is the perfect time to increase their computer knowledge and keep them engaged.

PVNET/Annex is a state of the art facility with over 20 high-tech computers and a trained staff that will work with your child to ensure that they get the necessary computer survival skills.

Classes will be held from 3:00 p.m. – 4:50 p.m. on:

August 10-21, 2009

We've had so much demand that we've had to create another class. The cost for the class is \$300 for the two week session. E-mail kristin.libby@verizon.net to reserve your spot. Space is limited to 12 kids per class, so don't delay in signing up!

Here's a very brief outline of what your child will learn:

Brief Introduction to Basic Typing Skills

- Learn the Fundamentals of Touch Keyboarding

Introduction to Word

- Learn the Toolbar
- Learn How to Create a New Document
- Learn How to Format a Document & Tabs
- Learn How to Insert a Table, Text & Pictures in a Document
- Insert Clip Art
- Learn to Make Documents Look Professional

Introduction to Excel

- What is a Spreadsheet?
- Basics of a Spreadsheet – Columns, Rows & Cells
- Types of Data - Labels & Format
- Formulas - Basics & Change Formulas
- Prepare a Chart

Introduction to PowerPoint

- Learn How to Create a Presentation
- Create a Slide & Using Templates
- Implement Slide Animation
- Slide Transitions and Timing
- Organize and View Slide Show and Create Speakers Notes
- Inserting Graphics & Adding Sound

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Parent's Names: _____

Guardian: _____

E-mail: _____

Student Name: _____ Male/Female: _____

Student Name: _____ Male/Female: _____

Student Age: _____ Birth Date: _____

Student Age: _____ Birth Date: _____

Address: _____

City/State Zip: _____

Mother's Home Phone: _____ Other #: _____

Father's Home Phone: _____ Other #: _____

Emergency Name and Phone: _____

Method of Payment (\$300 Fee) Note: **It's tax deductible!** Please circle one:

- Credit Card: Visa or MasterCard
- Check (make payable to: Palos Verdes on the NET)
- Cash

Card #: _____

Issue Date and Expiration: _____

3 Digit# on back of card: _____

Signature: _____

Please include a copy of your check or the front and back of your credit card & mail to:

Palos Verdes on the NET

Att: Computer Survival Skills

30940 Hawthorne Blvd. # 101 Rancho Palos Verdes, CA 90275

310-541-7992 <http://www.palosverdes.com/annex>

Agreement/Disclosure:

By attending any event by PVNET/Annex or PVNET/Main, you and your guests agree to the all of the following:

To sign up online for a free user account on the PVNET/Annex on-line scheduling system and to receive occasional email or mail announcements; To attend a short class to learn how to use the on-line registration system when required; To permit PVNET to publicly include your name as a supporter and endorser of PVNET.

Any fees paid to enroll in any class or event at PVNET or PVNET/Annex are non refundable; Summer programs especially are non-refundable because the fees are paid to instructors at the time of enrollment, materials and sometimes hardware are purchased immediately for students use, along with cost to provide the facility for a particular time to meet with students, staffing costs and other misc. costs. In the event that a student wishes to exit a class for any reason, no refund will be made.

PVNET reserves the right to offer discounts for any classes on a case by case basis. Any errors in advertised pricing are exactly that - an error and PVNET is under no obligation to offer any service for a fee which was advertised in error. The customer agrees to pay the correct amount in order to enroll in a class or purchase a service.

All families (you) who enroll any student who is younger than the recommended age for a particular class acknowledges that they enrolled their child with full knowledge and agreement that they have done so solely to provide their child with an "observational experience" and not for the purpose of fully comprehending and understanding the class material, and release PVNET from any obligations to provide more than an "observational experience". Any student who is disruptive in any way may be asked to be picked up by the parents, and if necessary to exit the class without refund.

The responsible student or party responsible for the student attending the class agrees to replace or pay in full for any damages to equipment, furniture, or property caused by you, your child, or your guests at PVNET/Annex. You agree that you and your guests hold PVNET, it's staff, volunteers, interns and representatives, and the City of RPV and it's staff harmless for any accidents, losses, or injuries to you, your child, or your guest which may occur on City Hall or PVNET property;

Any information you submit to PVNET will be held in confidence. PVNET retains the right to refuse services to any one at any time, and for any reason, and without refund.

In the event that an instructor is not able to teach a class at any time, a substitute instructor will be provided; in the event that a class has to be rescheduled on any particular day a make up day will be selected and offered at PVNET's discretion.

In the unfortunate event that a class has to be cancelled, PVNET reserves the right to do so without notice, in which case at PVNET's discretion, either an alternate class will be offered as soon as possible, or a refund will be made within 90 days.

PVNET is a 501c3 charitable organization and any contributions made to PVNET are tax deductible. This agreement may change slightly from time to time and you agree to check back occasionally to familiarize yourself with it's terms. No additional written notices will be provided.

WAIVER AND RELEASE

Dear students, parents/guardians:

All Students Interns and volunteers, participating at Palos Verdes on the NET Community Computer Technology Center, maybe or will be involved in activities including but not limited to: writing, video production, graphic design, internet publishing, photography, interviews, articles in newspapers, public announcements, commercials, interviews of themselves as well as others, and many more activities. We require the following agreement to be accepted as a term and condition for joining our programs by the adult student or intern (Student) , or by the parent or guardian of each participating minor student or Intern (Student).

Thank you.

AGREEMENT

I/We, the Student and parent or legal guardian of the Student hereby assume all risks and accept all responsibilities and duties resulting from the Student's participation in the Student Internship Program. By signing this Agreement, all signatories acknowledge that they have read, understand and expressly agree to its terms and conditions.

I/We, the Student and parent or legal guardian of the Student , hereby voluntarily and knowingly release Palos Verdes on the NET Community Computer Technology Center and their officers, directors, agents, employees, all other related persons or entities, their successors and assigns from any and all claims, actions, demands or rights to monetary award whatsoever arising from any and all injury or physical harm which may occur to the Student, including specifically any that may arise out of, or be occasioned by, either directly or indirectly, any negligent act(s) or omission(s) of said persons or entities, while the Student is engaged in the Student Internship Program.

I/We, the Student and parent or legal guardian of the Student, hereby grant to Palos Verdes on the NET Community Computer Technology Center and their successors and assigns the unconditional and perpetual right to use the Student's name, picture, likeness and all work product generated during the course of the Student Internship Program, in print, on television, on the internet and/or on any other media, without any right on behalf of the Student or parent or legal guardian to any remuneration in connection therewith. Student and parent or legal guardian hereby consent to such usage and waive any and all claims, actions, demands or right to monetary award whatsoever in connection with the use of Student's name, picture, likeness and work product as described in this paragraph.

I/We, the Student and parent or legal guardian of the Student, further understand that, by enrolling or participating in any program offered by PVNET, are binding ourselves and our heirs, executors, administrators, successors and assigns.

Last updated: 2007-03-02

Creation date: October 1, 1996 <http://www.palosverdes.com/annex/index.cfm?pg=agreement>

STUDENT EMERGENCY INFORMATION FORM

STUDENT NAME: _____ BIRTHDATE: _____ PHONE : () _____
(last) (first)

ADDRESS: _____

PUPIL RESIDES WITH: _____ RELATIONSHIP: _____ LEGAL
GUARDIAN _____

MOTHER (or guardian): _____ EMPLOYER: _____

DAYTIME PHONE (if different from above): () _____ EVENING PHONE: () _____

FATHER (or guardian): _____ EMPLOYER: _____

DAYTIME PHONE (if different from above): () _____ EVENING PHONE: () _____

BEEPER/PAGER/CAR PHONE: () _____

In the event of illness/emergency, your child will be released only to the parent(s), school/legal guardian, or local persons listed below:

NAME: _____ ADDRESS: _____ DAY PHONE: _____

NAME: _____ ADDRESS: _____ DAY PHONE: _____

NAME: _____ ADDRESS: _____ DAY PHONE: _____

IMPORTANT REMINDER: When both parents/guardians plan a temporary absence from the home, the PVNET office is to be notified IN WRITING of the adult who will be responsible in the event of an emergency.

In the event the parent/guardian cannot be reached, permission is hereby given for the physician, dentist, and/or hosp designated below to provide emergency care for my child should serious illness occur at PVNET Annex:

Physician: _____ Address: _____ Phone: () _____

Dentist: _____ Address: _____ Phone: () _____

Hospital: _____ Address: _____ Phone: () _____

Date of Last Tetanus Toxoid Booster: _____ Special Medications: _____

Allergies to Drugs or foods (specify): _____

Current Health Problems or Pertinent Information: _____

EMERGENCY DISASTER RELIEF FORM

As legal custodian of _____, a minor, I hereby authorize the staff of Palos Verdes on the Net/Annex, into whose care the aforementioned minor pupil has been entrusted, to consent to any X-ray, examination, anesthetic, medical, or surgical diagnosis, treatment, and/or hospital care to be rendered to said minor upon the advice of any licensed physician and/or dentist. I understand that this authorization is given in advance of any required diagnosis, treatment, or hospital care and provides the authority and power to the aforementioned agent(s) to give specific consent to any and all such diagnosis, treatment, or hospital care with a licensed physician or dentist may deem necessary. This authorization shall remain effective for the period enrolled unless revoked in writing and delivered to said agent(s). I understand that the Palos Verdes on the Net/Annex, and its employees assume no liability of any nature in relation to the transportation or treatment of the said minor. I further understand that all costs of paramedic transportation, hospitalization, and any examination, X-ray, or treatment provide in relation to this authorization shall be my responsibility.

I understand that the Palos Verdes on the Net/Annex does not provide accident medical insurance for students for school-related injuries.

Person(s) Assuming Financial Responsibility: _____

Name of Insurance Company: _____ Policy/Group Number: _____

SIGNATURE OF MOTHER (or guardian): _____ Date: _____

SIGNATURE OF FATHER (or guardian): _____ Date: _____