



Student Membership Form

21st Century Community Learning Center/F.I.T for Life
Soaring Beyond Expectations

OFFICE USE ONLY

Site # _____
 Bus # _____
 Date Entered in Computer ____/____/____
 Data Staff Initials _____

Participant Registration Form 2017 Newport Middle School, Newport Intermediate School, Newport Primary School

<p>Last Name _____</p> <p>First Name _____</p> <p>Middle Initial _____</p> <p>Age _____</p> <p>Date of Birth ____/____/____</p>	<p>Gender (check 1) <input type="checkbox"/> F <input type="checkbox"/> M</p> <p>Ethnicity (check 1) <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black (not of Hispanic origin) <input type="checkbox"/> Hispanic <input type="checkbox"/> Biracial <input type="checkbox"/> White (Not of Hispanic origin) <input type="checkbox"/> Other _____</p>	<p>Address _____ _____</p> <p>Zip Code _____</p> <p>Phone _____</p> <p>School _____</p> <p>Incoming Grade _____</p> <p>Homeroom Teacher Name (if known) _____</p>	<p>Transportation (check 1) <input type="checkbox"/> Picked up <input type="checkbox"/> Walk Home</p> <p>Lives with (check 1) <input type="checkbox"/> Both Parents <input type="checkbox"/> Single mother <input type="checkbox"/> Single father <input type="checkbox"/> Guardian <input type="checkbox"/> Joint Custody <input type="checkbox"/> Foster care <input type="checkbox"/> Grandparent(s) Other _____</p> <p>Special Needs (allergies, medications, diet, etc.)</p>	<p>Programs(s) of Interest:</p> <p>K-5th Grade program: <input type="checkbox"/> Project Funway 21st C. SummerCare June 5-June 30 @ NIS</p> <p><u>SPOTS ARE LIMITED.</u> Students are not enrolled in programming until you are notified by staff.</p>
--	---	---	--	---

Behavior Policy

All students participating in the 21st Century Community Learning Center are expected to follow the rules as outlined in the Newport Independent Schools Student Code of Conduct, as well as any other site-specific rules established by the Site Coordinator. The 21st CCLC/F.I.T for Life staff hold the right to suspend students who are in violation of the Student Code of Conduct. In addition, there is zero tolerance for verbal and/or physical threats to staff or other students. If a student verbally or physically threatens they will be immediately removed from the program.

Newport Independent Schools

Summer Participant Registration Form

OFFICE USE ONLY		
Site #	_____	
Date Entered in Computer	____/____/____	
Data Staff Initials	_____	

Parent/Guardian Last Name	First Name	Home Phone	Work Phone	Relationship

ADDITIONAL CONTACTS: List additional contacts for the child(ren) and use the check boxes to indicate if these individuals are authorized to pick up the child(ren) and/or will serve as an emergency contact. Checking the 'Lives With' box indicates that the person listed is a member of the same household. *If no adults are listed below, and no boxes are checked, ONLY THE PARENT(S)/GUARDIANS WILL be able to pick on the student(s).*

Last Name	First Name	Address	Home Phone	Work Phone	Relationship	Pick Up?	Emergency Contact	Lives With?
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Check box if legal restrictions are in effect. List persons not allowed to see student at Site and/or persons not allowed to pick up students per legal restrictions.

Last Name	First Name	Last Name	First Name

Parent/Guardian Permission For CLC * PLEASE READ CAREFULLY *

Must be signed by Parent/Guardian for participants 18 and under

The individual picking up the child must be authorized by the parent/guardian and sign for the student. If you wish for your child to walk home you must give permission (on back). **All Newport Independent School District rules and regulations are in effect during the program and participants must abide by them.** Failure to comply with rules will result in ejection from the program.

I hereby give my permission for the above student to participate in the Summer Enrichment program. I have read and reviewed the Student Code of Conduct of the Newport Independent School District and understand this is a 21st Century Community Learning Center/F.I.T for Life Sponsored Center/Event. I agree that the Center shall not be responsible for any personal injuries or losses sustained while at the Center or as the result of any sponsored activities. If necessary and I hereby authorize staff of the Center to obtain emergency medical care for the above youth.

I hereby certify that I have read and do understand the above information:

Signed _____ Print Name _____ Date _____ Page 2 of 2