



Redd School

Academic Excellence with a HEART!

Registration Forms J-10

Enrollment Date: _____

Referred by: _____

Student's Name _____

Address _____

City _____ State _____ Zip _____

Subdivision _____ Home Phone _____

Email Addresses (1) _____

(2) _____

Previous School/Address _____

Date of Birth _____ Grade Entering _____

Student lives with: Mother _____ Father _____ Both _____ Other _____

Step-Parent Name _____

Other children in the family - Names/Ages _____

Father's Name _____

Occupation _____

Firm _____ Business Phone _____

Other phone numbers (Cell, Pager, Etc.) _____

Mother's Name _____

Occupation _____

Firm _____ Business Phone _____

Other phone numbers (Cell, Pager, Etc.) _____

Photography: I _____ DO _____ DO NOT give my permission for my child's photographs to be used on the Redd School website and/or for public relations purposes. I _____ DO _____ DO NOT give permission to give my contact information to other parents. *Please initial* _____

YES, I have signed all releases.
Please Initial _____

Extended Care Services? Yes _____ No _____

Information Updates

I understand that it is my responsibility as the parent or legal guardian to update information on this form as changes occur.

Signature of Parent or Legal Guardian

Date

Redd School General Accident Releases

I, the undersigned, being the individual, parent or legally authorized and qualified guardian of _____, agree to hold Redd School, its administration, and/or faculty, harmless from all liability from any injuries which any member of my family may receive while participating in any recreational activities or utilizing the Redd School facilities.

I authorize the Redd School director and/or responsible employee to secure medical services for any family member if necessary, and I agree to pay, either directly or through my personal health and accident insurance policy, all related expenses including medical, hospital, etc.

Signature of Parent or Legal Guardian

Date

Water Activities: I give _____ do not give _____ my consent for my child to participate in water activities (swimming, wading pools, etc)

Signature of Parent or Legal Guardian

Date

Field Trips

Student's Name _____ has my permission to go on any and all field trips that are part of the scheduled activities of his/her class at Redd School for the 2017-2018 school year. I hereby release the Redd School and its representatives from any and all claims, collectively and individually, which might arise as a result of any injury received by the above mentioned student during the course of any field trip. I understand that each trip will be properly supervised. Buses or private cars will be used for transportation as needed.

Signature of Parent or Legal Guardian

Date

I, _____, am willing and able to drive on field trips.

My car/van holds _____ children safely in seatbelts.

Call me at _____ to make arrangements.

Signature

Conferences

Redd School has an open door policy. Conferences are welcome and encouraged at your convenience. We feel that communication between teachers and parents is very important. I understand that I, as a concerned parent, may request conferences at any time during the school year and that if the teacher calls a conference it is important to attend as soon as possible.

Medical Information

Student's Name _____

Doctor's Name _____

Hospital Used _____

Medical Insurance _____

Policy # _____ ID# _____

I give my permission for any faculty member to transport my child for emergency medical services and I give my permission for emergency treatment by emergency personnel. I agree to be responsible for all expenses.

Signature of Parent or Legal Guardian

Date

My child's immunization record is on file at Redd School and all immunizations and tuberculosis tests are current.

Signature of Parent or Legal Guardian

Date

My child has _____ will be _____ examined by a licensed physician and is able to participate in the school program. I am submitting a statement from my physician.

Signature of Parent or Legal Guardian

Date

Medication

Student Name _____ Date _____

Is this student taking any medication at this time? Yes _____ No _____
At home? _____ At School? _____

Please list ALL prescriptions, dosages and prescribing doctor for medications given at school AND at home.

Medication Name	Dosage (Measurement)	Dosage (Times)	Prescribing Physician

Special Instructions for any medications taken during school hours. Some medications may require doctor's signature.

Signature of Parent or Legal Guardian

Date

NOTE: Please complete separate form available in office for dispensing medication at school. Some medications may require doctor's signature.

Emergency Information

Person(s) to Contact _____

Relationship _____

Phone # Home _____ Work _____

Other Phone # (cell, pager, etc) _____

Doctor's Name _____

Doctor's Address _____

Doctor's Phone _____

Accident/Medical Insurance Company _____

Policy Information _____

Allergies _____

Special information for emergency personnel:

I hereby give my permission to transport my child to a doctor or hospital if Redd School/Redd Ranch personnel consider it necessary. An ambulance or other emergency vehicles may be used, if deemed necessary by our staff.

Signature of Parent or Legal Guardian

Date

Rules and Regulations

Redd School rules and regulations are designed for safety, academic excellence and in an effort to create an environment where we encourage students to be ladies and gentlemen, thus enhancing the ability to focus and learn. As a parent, I will read the handbook and see that my child follows the rules and I will support the school in these endeavors.

Signature of Parent or Legal Guardian

Date

Festival Participation

Redd School has two festivals per school year and it is the responsibility of all stakeholders to make each festival successful. Your participation is required, both in the planning stages and on the day of each festival. Please look at the school year calendar and save the dates for both the Fall and Spring festivals.

I have read the above statement and agree to participate in the festivals.

Signature of Parent or Legal Guardian

Date

Deposits and Fees

Registration, Enrichment, Testing and Tuition Fees are NON-REFUNDABLE. Registration secures a place for your child in a limited enrollment situation.. Enrichment pays for special programs and/or field trips Testing fees pay for electronic assessment of test results. Tuition pays for the day to day education of your child. If a student leaves or is asked to leave, the above rules preside. I have read the above and understand these statements. I agree and will comply with the preceding statements.

Signature of Parent or Legal Guardian

Date

Redd School wants to make your time with us as positive as possible. Please use the space below to give us information about your child or family that may be helpful.

