

826 Seattle Registration for After School Tutoring, 2010-2011
 (Fill out one form per student)



Student's Name _____ Grade _____ Age _____ Sex M F Other _____
 Address _____ City _____ Zip _____
 School _____ Teacher _____
 Birth Date _____ Home Phone _____
 Parent's Email _____ Student's Email _____
 How did you hear about this program? _____

Tutoring runs from Monday-Thursday and students may attend 1 to 4 days per week. Tutoring is from 3:00 to 6:00 every day. 826 Seattle closes at 6:00 promptly, and all students must be picked up or have transportation arranged by this time. Please note when your student will be coming:
 Mon. Tues. Wed. Thurs.

Family Statistical Information

This information is for statistical purposes only, to satisfy funding agency requirements and is kept confidential. Please choose which race and ethnicity best describes the student:

Black/African American American Indian/ Alaskan Native Arab Asian
 Latino Caucasian West Indian Multi-Racial Other: _____

Language spoken at home: _____
 Does your child qualify for free or reduced lunch at school? Y N

Parent/Guardian Information

Name _____ Relationship _____
 Cell Phone _____ Daytime/Work Phone _____ Evening _____

Name _____ Relationship _____
 Cell Phone _____ Daytime/Work Phone _____ Evening _____

Emergency Information—We Can Only Release Your Child to the People Listed Below

Please list the names and phone numbers of persons other than parents/ guardians listed above who can be contacted in case of emergency and are authorized to pick up your child from the program. Attach list of additional contacts if necessary.

Name _____ Relationship _____ Telephone _____
 Name _____ Relationship _____ Telephone _____
 Name _____ Relationship _____ Telephone _____

Medical Information

Family Doctor _____ Phone _____
 Hospital/Clinic _____

Does your child have any medical conditions (allergies, asthma, heart condition, seizures, diabetes, hearing or sight loss, etc.)? Yes No.
 If yes, please explain: _____

Please read the following and sign below

I hereby certify that, to the best of my knowledge, the above statements are true and correct. I give 826 Seattle permission to assess my child's academic skills. I give my child permission to participate in 826 Seattle's Tutoring Program and will ensure that he/she attends the program at least one afternoon per week. I give 826 Seattle permission to contact my child's teachers to discuss his/her academic progress, to contact the school counselors as needed, and to obtain copies of report cards. I understand that I am responsible for updating all contact information and parent guardianship, should they change during the course of the year. I give 826 Seattle permission for my child to be photographed, videotaped, published, and/or audio taped for the purposes of students' learning and/or publicity for the program. I transfer and assign to 826 Seattle all copyrights, titles, and interest in any such works, including all rights of registration, publication, and the right to create derivative works. I give permission for my child to receive emergency medical treatment if necessary. I understand that 826 Seattle cannot assume responsibility for injury, accident or illness and I agree to hold harmless 826 Seattle, their directors, officers, employees, and volunteers, from any liabilities, demands, or claims for damage.

Parent/Guardian Signature _____

Date _____

*****Please attach a copy of your child's final report card from the 2009-2010 school year.*****

There will be a parent orientation meeting at 826 Seattle on **Friday, Sept. 10th, at 5:30 pm.**
Please join us to register, and learn more about After School tutoring!
8414 Greenwood Ave. N.
Seattle, WA 98103
206-725-2625

Student Agreement

Students are the most important part of the 826 Seattle community. To enjoy our free services, all students must agree to the following guidelines:

- I agree to work on my homework, projects, or assignments when I am at the center
- When I am finished with my work, I agree not to be disruptive
- I agree to respect the tutors, students, and staff of 826 Seattle
- I agree to respect the property of 826 Seattle, and of other students, and of the volunteers
- I agree to leave 826 Seattle by 6pm
- I understand that if I do not stick to this agreement, I will be asked to leave for the day.

Students are asked to sign this agreement, indicating that they've read, and agreed to the guidelines. Please help us maintain smooth operations by ensuring your student is picked up promptly by 6:00 pm.

Signature: _____ Date: _____

For Office Use Only:
Date Rec'd: _____
Rec'd by: _____
Past 826 Participant [] Y [] N
Date Entered:



Student Profile

Please help us update our files to contain all the important information we need to best serve your family.

Your name: _____

Child's name: _____

Date: _____

1. Does your child have any special needs or specialized learning preferences that we should be aware of?

2. What are your child's greatest strengths, interest, or hobbies?

3. What are the greatest academic challenges your child faces at school, if any?

4. What are the greatest personal challenges your child faces at school, if any?

5. Is there any additional information we should know in order to best support your child?