



The names and grades of my children and the programs in which I wish them enrolled are as follows:

	Name(s)	Grade	Birth Date	Class Room #	AM Session	PM Session
1.						
2.						
3.						
4.						

**ANY CURRENT RESTRAINING OR OTHER COURT ORDERS? YES NO
IF YES, A COPY MUST BE SUBMITTED TO STONE SOUP**

The following are adults whom I authorize to pick up my children or to be called in an emergency. Other persons on this list may be called in the event that the parent/guardian or person who arrives to pick up the child is late or is under the influence of drugs or alcohol. Any person picking up a child may be asked for photo identification. Only in person modifications may be made to paperwork by parent.

	Name	Phone #	Relationship
1.			
2.			
3.			
4.			

	Parent/Guardian	Cell Number	Alternate Number
Name			
Name			

Medical problems or concerns/special needs:

List any medications being taken: _____

Name of child's doctor _____ Phone # _____

Insurance Company _____ Insurance Policy # _____

Transport my child to this hospital in case of emergency _____.

Administrative procedures vary among medical personnel and medical facilities with regard to provision of medical care for a child in the absence of the parent/guardian. The exact procedure required by the physician or hospital to be used in emergencies should be verified in advance.

In case of accident or emergency, I authorize a Stone Soup Child Care Program staff member to call for emergency ambulatory service to take my child to that above named physician or to the nearest emergency hospital for such treatment and measures as are deemed necessary for the safety and protection of my child at my expense.

Signature of Parent/Guardian Date

Name of Parent/Guardian (Print)

Address City Zip Code

Cell Phone

E-Mail Address

Business Phone



Assertive Practices

A good learning environment provides each child with knowledge, discipline, care and concern. Each child must enjoy school, feel supported by teachers and feel safe in his/her environment for educational, social and psychological development to occur.

To provide optimum care for your child, we expect specific behaviors from him/her. We have outlined these patterns below and have also listed the disciplinary measures that will be taken if your child deviates from these patterns.

The student will:

- Follow school rules
- Obey authority
- Be a willing participant in the program

The student will **NOT**:

- Use profanity
- Leave the assigned area
- Disrupt the activities of the program

The following behaviors are considered **SEVERE**. The consequences of these actions may result in the child's suspension or even expulsion from the program. Depending on the severity of the act, the consequences may be **IMMEDIATE, with no prior notice given.**

1. Harming other children or staff with malice or threatening to do so.
2. Carrying a weapon.
3. Leaving the area.
4. Possession, being under the influence, or selling alcohol, drugs, tobacco, or its paraphernalia.
5. Habitual profanity or obscenity.
6. Habitual defiance of authority
7. Damaging, stealing, or attempting to steal school or private property.
8. Severe disruption of school activities.
9. Robbery or extortion.

I agree to the Assertive Practices

Signature of Parent/Guardian

Date



Welcome To Stone Soup

T-shirt Order Form

Parent/Guardian

Stone Soup would like to welcome you to our program! We are looking forward to having your child(ren) in Stone Soup. When you turn in your paperwork to enroll your child in Stone Soup, **please remember to make a separate money order or cashier's check of \$ 30.00 Registration fee per child made payable to Stone Soup. This is the required registration fee that includes a Stone Soup t-shirt which must be worn on field trips and other events.**

Since you only need to pay this registration fee once, as the years pass, if your child(ren) is/are in need of a larger size, you may purchase another for just \$ 10.00.

Thank you for your support of our program!

Supervisors Initials _____ Amount Paid \$ _____

Money Order # _____ Date Received _____

Please return the bottom portion of this form with your **separate money order payable to Stone Soup for the \$ 30.00 Registration fee for each child.**

Circle T-Shirt Size For Each Child

Child's Name _____ Sm (4-6) Med (10-12) Lg (14-16) Adult Small

Child's Name _____ Sm (4-6) Med (10-12) Lg (14-16) Adult Small

Child's Name _____ Sm (4-6) Med (10-12) Lg (14-16) Adult Small

School _____ District _____

Supervisors Initials _____ Amount Paid \$ _____

Money Order # _____ Date Received _____

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