



## Reading and Tutoring Support Registration

This free program is open to grades K–2 and grades 5–6. The spring 2019 session will run on Mondays and Wednesdays from February 4<sup>th</sup> through May 8<sup>th</sup>. Registration is for the entire session and children must attend both days each week. The program will not meet during school breaks.

### CHILD'S INFORMATION (one form per child)

Last Name	First Name	Date of Birth	<input type="checkbox"/> Male <input type="checkbox"/> Female
School	Grade	Age	
Child resides with	<input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Both <input type="checkbox"/> Other (name)	Relationship	

### PARENT/GUARDIAN #1 INFORMATION

Last Name	First Name	Date of Birth	
Address	City	State	Zip
Home Phone	Cell Phone	Email	

### PARENT/GUARDIAN #2 INFORMATION

Last Name	First Name	Date of Birth	
Address	City	State	Zip
Home Phone	Cell Phone	Email	

### EMERGENCY CONTACT(S) – OTHER THAN PARENT/GUARDIAN (must be local and include address)

Name	Phone 1	Phone 2	Relationship
Address	City	State	Zip

Are the emergency contacts listed here authorized to pick up your child?  Yes  No

Please provide details (if necessary).

### INDIVIDUAL READING SUPPORT (Check box to register)

<input type="checkbox"/> 1:1 Reading Tutoring	4:30 – 5:30 pm	Mondays and Wednesdays 2/4 – 5/8/2019
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### GROUP WRITERS WORKSHOP (Check box to register)

<input type="checkbox"/> Small-Group Writers Workshop	5:30 – 6:00	Mondays and Wednesdays 2/4 – 5/8/2019
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### AGREEMENTS/SIGNATURE

I consent to the enrollment of the child listed above in this facility and will have my child attend both Mondays and Wednesdays for the entirety of the program from February 4<sup>th</sup> – May 8<sup>th</sup>.

Parent Initials

I agree to notify the Children's Programming Department by 1:00 pm if my child is ill and will be absent from the program.

Parent Initials

I agree to allow the above child to have his/her photo taken for promotional purposes for the program and the JCC.

Parent Initials

I affirm that the information I have provided on this form is accurate and complete. The JCC of Syracuse reserves the right to remove any child from the program.

Parent/Guardian Name (print)

Parent/Guardian Signature

Date