Hours of Operation: Before School Program Please DO NOT drop	<u>Student must have</u> will be held on each da	Griffin Middle Scho 2024 Before Scho <u>Registration F</u> an application on file in <u>No application! No entr</u> ay that school is in session frore 8:00 am	ool Program <u>orm</u> <u>1 order to participate.</u> <u>ry</u>	
Address:	LAST	FIRST	MIDDLE	Date of Birth
STREET			ZIP	
NAME OF PARENT Guardian LAST FIRST RELATIONSHIP:				
Email Address: _ Emergency Cont	act:	NAME EMAIL	RELATIONSHIP	
Important Medical Information (allergies, diagnosed health conditions, medications taken every day, etc.):				
Walker () Car Rider () Person authorized to drop-off the student: (Parent/Guardian filling our form understood)				
NAME	NSHIP	TELEPHONE	EMAII	 L
NAME RELATION	NSHIP	TELEPHONE	EMAII	
2023 – 2024 Griffin Middle School Before School Program * 800 Alabama Street * 850-617-5353				

Emergency Medical Authorization: Should my child referenced in this application become sick or injured while in the Before School Program and we are unable to contact you immediately. I authorize the facility to secure medical attention for my child as necessary. I (we) will assume financial responsibility for such care and the payment for said services. Parent or responsible party:

Enrollment Policies

- 1. Parents must complete the enrollment forms for each child who will attend the program.
- 2. All forms must be completed and returned to Mrs. Sanders before the child can participate in the Before School Program. You may scan and email if able.
- 3. Children will be allowed to attend the program only after all forms have been completed and returned.

EXPECTATIONS

- 1. Enter the cafeteria quietly and sign-in promptly,
- Supervision is required at all times. Do not leave cafeteria without staff permission
 Use courteous and appropriate language.
- 3. Use courteous and appropriate language.
- 4. No horse-playing. Keep hands and feet to yourself.
- 5. Follow directions promptly.
- 6. Respect fellow students, staff, and property.
- 7. Use courteous and appropriate language.
- 8. Phone & electronic devices are permitted,
 - however loud music or noise is not acceptable.

The following BEHAVIOR PLAN will be implemented to help create the best possible environment for your child and the other students in the program.

Ist Offense: Warning/Documentation **2nd Offense**: Student/Conference/Parent Notification/Documentation 3rd Offense: 1 day Suspension/Parent Notification 4th Offense: 3 days Suspension/Parent Notification 5th Offense: 5 days Suspension/Parent Notification 6th Offense: Withdrawal from the Before School Program.

*Students suspended or withdrawn from the program will need to make other arrangements for before school supervision. Student supervision begins at 8:45 a.m.

STUDENT AGREEMENT

I read, understand and agree to follow the rules required for participation in the Before School Program.

STUDENT NAME______SIGNATURE_____

DATE:

PARENT AGREEMENT

I read and understand the behavior required of my child. I understand and agree to accept the consequences as stated:

PARENT NAME: _______ SIGNATURE: ______

DATE: _____

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