

Volunteer job \_\_\_\_\_

Registration Fees:

Classes \_\_\_\_\_

TBC \_\_\_\_\_

Cleaning \_\_\_\_\_

Insurance \_\_\_\_\_

**Total** \_\_\_\_\_

Fall \_\_\_\_\_ Fees:

Date \_\_\_\_\_

Check # \_\_\_\_\_

Amount \_\_\_\_\_

Spring \_\_\_\_\_ Fees:

Date \_\_\_\_\_

Check # \_\_\_\_\_

Amount \_\_\_\_\_

**HALLSTROM HOME SCHOOL WORKSHOPS  
REGISTRATION FORM**

**Fall \_\_\_\_\_ – Spring \_\_\_\_\_**

Parents' Names (first and last) \_\_\_\_\_

Family ID \_\_\_\_\_ Teacher ID \_\_\_\_\_

Email address \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Zip code \_\_\_\_\_ Phone ( \_\_\_\_\_ ) \_\_\_\_\_ ( \_\_\_\_\_ ) \_\_\_\_\_

Church \_\_\_\_\_ Number of years at HHSW \_\_\_\_\_

In case of emergency, please contact:

Name \_\_\_\_\_

Phone ( \_\_\_\_\_ ) \_\_\_\_\_ ( \_\_\_\_\_ ) \_\_\_\_\_

Relationship \_\_\_\_\_

If you or your child does not particularly agree with an item in the handbook, for example a part of the dress code, how would you address that issue with your child?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are any or your children currently taking medication for or been diagnosed with A.D.D. or any other physical, behavioral or mental disability or disorder?

\_\_\_\_ Yes \_\_\_\_ No

If yes, please explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(This information is released *only* to the HHSW Board and any of your child's teachers in order that we may serve you better. You need to understand, though, that we are not formally trained to deal with special-needs children.)

## COMMITMENT TO HALLSTROM HOME SCHOOL WORKSHOPS

In the previous registration you agreed to:

1. Attend all classes you have registered for, and pay all your teachers for the entire semester.
2. Be present, in the building and responsible for your own children while they are in classes.
3. See that your children come well prepared for their classes, completing all homework, and that they work to their full potential in class. 7<sup>th</sup>-12<sup>th</sup> graders need to sign the Integrity Covenant.
4. Not hold the HHSW Chairman, board, teacher, or Temple Baptist Church responsible for any mishaps, injuries, or accidents that might occur during the year.
5. Subscribe to the HHSW Policy Handbook including the rules of conduct, dress code, and Statement of Faith.
6. Do your part, and remind your children weekly to do their part, to keep the building clean.
7. Attend chapel (mandatory for those who are in the building during this time).
8. No cell phones, MP3's or IPod-type devices allowed except in Fellowship Hall.

In order for our Fall (Spring) semester to be successful we will once again need your cooperation in the above mentioned areas. If this is true for you and your family, please sign below.

Parent(s) signature(s) \_\_\_\_\_ Date \_\_\_\_\_ (Fall)

Parent(s) signature(s) \_\_\_\_\_ Date \_\_\_\_\_ (Spring)