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TUTORING REGISTRATION FORM

| Today's Date | | | |
|--|---------------------------------|------------------|---|
| Child's Name | | | Birthday |
| Parent / Guardian Name | | | |
| Address, City, State & Zip | | | |
| Emergency Contact #1 | | | |
| Relationship-Parent | | | Phone |
| Emergency Contact #2 | | | |
| Relationship | | | Phone |
| Which school does your child attend? | | | |
| Grade | Teacher's Name | | |
| May we contact your child | d's teacher to coordinate work? | S YES | |
| May we photograph your child and use the photograph(s) for advertising or in media-sharing information about our | | | |
| tutoring program? | | | |
| Do you attend a church service? | | | |
| Would you consider Bethlehem? | | S YES | |
| | | | |
| SCHEDULE FOR THE EVENING | | | ONE AREA in which your child needs help |
| 5:30 pm Supper will be served | | with the most: | |
| | Tutoring time | | |
| 7 – 7:20 pm Bible Study & free choice activities Games / Art | | SPELLING WRITING | |
| Games / | Art | OTHER: | |
| PLEASE NOTE: Even if your child does not have any homework assigned, all are welcome to come to the tutoring sessions for enhanced learning in any area with which they need help. | | | |
| I, as Parent/Guardian of the child named above: | | | |
| Give permission to participate in the GROWING IN CHRIST tutoring program sponsored by Bethlehem Lutheran Church; | | | |
| Agree to notify the program of any allergies, special dietary or other needs my child may have; | | | |
| Agree to ensure that my child attends the tutoring sessions on time; | | | |
| Agree to give advance notice (24 hour advance notice preferred) if my child is unable to attend any particular session by calling Linda Kunz @ 651.855.8877. | | | |
| Signature Date | | | |

11 DAILY EXPECTIONS FOR YOUTH IN THE "GROWING TOGETHER IN CHRIST" TUTORING PROGRAM

All rules for the tutoring program fall under one of the following expectations:

- 1. I will demonstrate a Christ-like, respectful attitude toward myself, my tutors, other students, my family and others with whom I interact daily, both in and outside the program.
- 2. I will bring my backpack each week, but will leave toys and food at home.
- 3. I will keep my hands, feet and all objects to myself.
- 4. I will use appropriate language in and outside the program.
- 5. I will stay in my assigned seat and in my assigned area at all times.
- 6. I will ask to be excused to go to the restroom or get up for a drink of water.
- 7. I will listen, follow directions, use my inside voice and stay on task.
- 8. I will raise my hand and only respond when called on if I have a question, suggestion, or an idea.
- 9. I will not leave the building or run and play outside without an adult monitoring my activity.
- 10.1 will wait quietly in the assigned area to be picked up at the end of the tutoring session.
- 11.I will use my cell phone only when permitted by my tutor.

I HAVE READ AND UNDERSTAND THESE EXPECTATIONS:

Signature of Student: _____

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> GROWING TOGETHER IN CHRIST TUTORING PROGRAM BETHELEHEM LUTHERAN CHURCH + 655 FOREST STREET + ST PAUL MN 55106