

# ROBERTSON CHARTER SCHOOL REGISTRATION

Date \_\_\_\_\_

School Year _____	Entering Grade _____
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Student's Name  
(As seen on Birth Certificate)

\_\_\_\_\_

LastFirstMiddle

Home Phone \_\_\_\_\_

Home Address \_\_\_\_\_

StreetApt #Zip

Name of Parent or Guardian Last (if different)      First	Home Phone	Work Phone	Cell Phone

Race \_\_\_\_\_ Sex \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Last School/Grade Attended \_\_\_\_\_

(office use only)

REG. FEE \_\_\_\_\_ INSURANCE \_\_\_\_\_ LUNCH \_\_\_\_\_ PARENT CONTRACT \_\_\_\_\_ BUS \_\_\_\_\_  
OVER \_\_\_\_\_

Name of children living in the home Last (if different)      First	Date of Birth Mo/Da/Year	If attending another school please indicate

Please help us contact you by listing any telephone, cell phone or pager numbers we may use to reach you. If any contact information changes please let us know.

(If you have multiple children and have listed them above you only have to list contact information on one registration form.)

Name	Relationship	Phone	Phone

Please list the people who have permission to pick up in case of emergency \_\_\_\_\_

Signature of person giving information \_\_\_\_\_

Is any other language spoken in the home? Yes \_\_\_\_\_ No \_\_\_\_\_

Does the student have any allergies? Yes / No  
To? \_\_\_\_\_

Or take any daily meds? Yes / No

Meds: \_\_\_\_\_

# Robertson Charter School

## Parent Contract

### Philosophy

Robertson Charter School maintains a high standard of academic excellence to raise the achievement levels of its students. We pledge to develop the child to his/her highest potential. He/she will become a responsible and active citizen of our society. All school activities will be structured around character development, family and community values, and strong work ethics. We pledge to establish a learning environment that will provide exceptional educational experiences for all students.

### Student Eligibility

The following criteria will be considered in processing applications:

- Parent-teacher orientation
- Lottery system of selection
- Parent participation agreement

### Parent Involvement Requirements

As a parent, I pledge that:

- I will be responsible for my child's behavior
- I will retain my role as the parent and major disciplinarian of my child in order to support the school's efforts to educate
- I will maintain cooperative contact and communication with the school and my child's teacher
- I will attend all parent conferences or make arrangements with my child's teacher
- I will commit my time to volunteer when possible.
- I will support classroom activities
- I will assist as a field trip chaperone whenever possible
- I will supply my child with the basic necessary supplies for school
- I will make sure that my child abides by the uniform codes
  - 1) Shirts- the school issue polo shirt is worn daily
  - 2) Pants- any color or style except sweats or skeets (plastic sweats)
  - 3) Belts- this is a major problem and we need your help to solve it. All students are to wear a belt everyday.

### Parent Pledge

I have read the philosophy, rules, and requirements of the Robertson Charter School. I will assist in this partnership by fostering an environment dedicated to the educational needs of my child. My signature below indicates my agreement to adhere to these rules and regulations.

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Signature & Date

**Robertson Charter School**

**Publicity Permission**

The Robertson staff is proud of our school and our positive program. Therefore, we are asking for your support in our efforts to publicize our success. Please sign and date.

My child \_\_\_\_\_ **has permission** to participate in any video taping, newspaper articles, TV coverage, or any use by the media.

My child \_\_\_\_\_ **may not** participate in any videotaping, newspaper articles, TV coverage, or any use by media.

**Personal Information**

In an effort to keep parents involved and informed each class will have a classroom contact person. The person will contact classroom parents whenever there is a need involving the school. Do you give permission for your name, address, and home phone number to be shared with this person?

**Library**

The library offers a large variety of books. You and your child are responsible for the books as well as the fines for late or misplaced books. Robertson Charter School will provide each student with an application for their own library card.

**Lost/Damaged Materials**

Your child will be assigned books and other materials to aid his/her education. These books and materials will remain the property of Robertson Charter School. You will be responsible for the replacement value of any lost, stolen, or damaged books or materials that is assigned to your child.

**I have read and understand my child and I will be responsible for maintaining all school property and following all rules.**

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

# Robertson Charter School Field Trip Permission Slip

In connection with class work, there will be some occasions when the students of Robertson Charter School will visit places of interest in Decatur or surrounding cities. Most visits will be during the school day, unless prior notice is given. They will be taken by school bus, or walk a short distance. Teachers and Chaperones will always carefully supervise the children.

This form is to gain your permission so your child may accompany the class on these short visits during the school year. Permission Slip will be made part of your child's folder. Please return this entire sheet to your child's teacher.

Please note: *Illinois Department of Public Health regulations require parents to be notified of any accident where Emergency Medical Services are called (ambulance, fire department, ect.). Even if your child is not injured, he/she must be taken to the emergency room if the parent or guardian cannot be contacted. It is imperative that we know how to reach you. Please write in all phone or pager numbers where you can be reached.*

\_\_\_\_\_ has my permission

*Student's Name & Grade Level*

to go on all field trips which are planned and supervised by the school.

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

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Phone 1

\_\_\_\_\_  
Phone 2