

# 2019 Safety Town Registration Form



Program Fee \$175. Make check payable to Safety Town, and mail with completed registration form to: **SAFETY TOWN, c/o Anne Gould,**

**30 Winchester Canyon Rd. # 135, Goleta, CA, 93117**

**Registration Deadline: July 1, 2019 or until full.**

\*Subject to grant approval, scholarships will be provided. If applying for a scholarship, please complete the scholarship application available in the school office to be submitted with this completed form and \$25 Family Co-pay.

**Isla Vista School**  
**For incoming**  
**Kindergarteners or 1st**  
**Graders only**

PLEASE PRINT CLEARLY and COMPLETE ALL FIELDS

## Child Information

Child Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Birth Date - Must be 5 yr. by 9/01/19 and not older than first grade \_\_\_\_\_  Male  Female

Street Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Parent/Guardian Names (Both if applicable for pick-up) \_\_\_\_\_ Home Phone / Cell Phone \_\_\_\_\_ \* circle preferred phone # to teach child

Work Phone \_\_\_\_\_ / E-Mail Address, (for confirmation purposes only) \_\_\_\_\_

What is your preferred method of contact to receive confirmation? \_\_\_\_\_ Email \_\_\_\_\_ Phone call, (home or cell ?) \_\_\_\_\_ Mail \_\_\_\_\_

Preschool child is presently attending \_\_\_\_\_ / School child will attend in the Fall \_\_\_\_\_ / Primary language spoken by child \_\_\_\_\_

## Session Information -

Please select **ONE** session:

**FULL SESSION 1 – July 8-12** 8:30 a.m.-12:00 p.m.  
**FULL SESSION 2 – July 15-19** 8:30 a.m.-12:00 p.m.

**\*\*\*Please note, SAFETY TOWN reserves the right to cancel sessions due to enrollment numbers. You will be notified one month prior to beginning of session if this occurs.**

## Medical and Emergency Information

Physician's Name \_\_\_\_\_ Phone \_\_\_\_\_

Emergency Contact- Name/ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Allergies/\* Medications \_\_\_\_\_ / Physical, Social, or Emotional Limitations ? \_\_\_\_\_ / IEP/ IFSP or other support services in preschool? \_\_\_\_\_

**\* SAFETY TOWN TEACHERS AND VOLUNTEERS ARE NOT AUTHORIZED TO ADMINISTER ANY MEDICATIONS. This also refers to inhalers and Epipens. Please inform us of any medical issue by submitting additional form signed by doctor PRIOR to first day.**

1. \_\_\_\_\_  
Name(s) of Person Authorized to Pick Up Child, (other than parent) \_\_\_\_\_ Phone \_\_\_\_\_

2. \_\_\_\_\_  
Name \_\_\_\_\_ Phone \_\_\_\_\_

- We will only release your child to those authorized by you.
- If children with Special Needs require a 1:1 aide, an AIDE must be provided by PARENTS.
- We reserve the right to make appropriate adjustments to ensure the safety of all participants of Safety Town.

- REGISTRATION FORM CONTINUED ON BACK - Office use only: FP \_\_\_ # \_\_\_ CP \_\_\_ CA \_\_\_ # \_\_\_

**SAFETY TOWN Waiver and Release of Liability**

I, the parent/guardian of \_\_\_\_\_, (print child’s full name), for myself and for my minor child, do hereby fully release and hold harmless Safety Town of Santa Barbara County, Goleta Union School District, and any agent, volunteer, or member of these organizations from any and all liability, loss, damages, or injuries arising out of participation in the SAFETY TOWN program in which I have enrolled my child.

I have read and fully understand this Safety Town Waiver and Release.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

**Parent Authorization**

Photographs/Videos may be taken by outside agencies, (newspaper, television, etc.), during Safety Town activities for publicity purposes. These pictures are not to be used to commercially exploit the student. Do you give permission for your child to be photographed? \_\_\_\_\_ YES \_\_\_\_\_ NO

By registering my child, I give permission for my child to participate in the Safety Town program. I understand that there will be one off-site field trip, (ride on city bus), with Safety Town participants only.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

**Parent Information**

- **Please note, Safety Town of Santa Barbara County reserves the right to cancel sessions due to enrollment numbers. You will be notified if this occurs.**
- A parent/guardian must attend an important parent orientation meeting on the first scheduled day, Monday, from approximately 8:30-9:00 a.m.
- Pick up – please arrive BY 12:00 p.m. each day. A fee of \$25 will be charged for every 15 minutes you are late picking up your child.
- Participants must be able to follow simple instructions. Inappropriate and/or unsafe behavior may be grounds for dismissal from the program. The Safety Town staff and Safety Town of Santa Barbara County reserve the right to make appropriate adjustments and/or dismiss any student for behavior which poses a safety risk to themselves or others.
- How did you hear about SAFETY TOWN? (Please circle all that apply)

Word of Mouth    TV    SB Independent    Internet/Website    Pre-School    Elementary School

A confirmation email or letter will be sent to you within 3 weeks of receipt of your registration form.

**For more information: Call Anne @ 252-7998, or email [annegsb@cox.net](mailto:annegsb@cox.net), or visit our website at [www.sbsafetytown.org](http://www.sbsafetytown.org)**

**Safety Town Tax ID # 77-0050993**