



Soaring Eagles Homeschool Group

2011-2012 Registration Packet

Mail to:
Soaring Eagles
135 Lady Helen Ct.
Fayetteville, GA 30214

Below is the checklist of documents to be read and signed by all prospective Soaring Eagles members. The items marked with an asterisk (**) are required by previous members. All documents should be completed and checked, in order to complete registration. Please initial each item indicating it has been completed. If a sheet is incomplete please make a note of it on this page.

_____ 1. Leadership Consultation. All prospective members should take the opportunity to speak with one of the co-op leaders, Leah Dodson 678-489-4892 or Christi McCully 770-253-7856.

_____ 2. Bylaws. All prospective members must familiarize themselves with the SE bylaws and statement of faith and sign the document acknowledging accordance with all aspects thereof.

** _____ 3. Teaching/Support Responsibilities: All parents must fill out this document and sign indicating their understanding of all teacher/support responsibilities.

** _____ 4. Medical liability: Families must sign the liability form which also indicates any medical problems your child may have. (One form per child)

** _____ 5. Financial Obligations: Please sign indicating your understanding of the policies having to do with class fees and reimbursement.

** _____ 6. Photo Use Clause: Please sign either giving permission to use your child's photo or declining from this option. (One form per child)

** _____ 8. Parent Responsibilities: All parents must fill out this document and sign indicating their understanding of the responsibilities of each parent.

** _____ 7. Registration: Fill out one sheet per child indicating class selections and appropriate personal information. (One form per child)



Soaring Eagles Homeschool Group

2011-2012 Bylaws Agreement

I, _____, have read the Soaring Eagles bylaws (found at soaring-eagles.net). I have discussed the contents with all members of my family who will be participating at SE. By signing this document my family consents and agrees to abide by the contents of the SE bylaws.

Signature

Date



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2011-2012 Teaching/Support Responsibilities

1. Commit to a teaching 1 class for the full school year. _____(initial)
2. Teach 1 class _____ (name of position).
3. Teach or assist in 1 class. _____ (name of class).
4. Attend teacher training this summer Aug. 13, 2011.
5. Prepare a syllabus for class due July 15.
6. Prepare lesson plans to be executed during assigned class times unless other arrangements are made.
7. Prepare emergency lesson plan to be kept in file folder in case of unforeseen absence.
8. Grade homework and return to students in a timely manner.
9. Enter numerical grades into engrade weekly.
10. Post homework assignments by Mon. at 8 p.m.
11. Comply with substitute guidelines in case of absences.

Signature

Date

OR

1. Commit to fulfilling 1 support role for the full school year. _____(initial).
2. Support role to fulfill _____(name of position).
3. Teach or assist in 1 class. _____(name of class).
4. Attend teacher training this summer Aug. 13, 2011.
5. Meet with Christi or Leah at least once a month to give a status update. _____(initial).
6. Comply with substitute guidelines in case of absences.

Signature

Date



Soaring Eagles Homeschool Group

2011-2012 Participation Form/Liability Release

I, _____, parent/guardian of

_____, a student in Soaring Eagles Homeschool Co-op, agree that:

1. The above named student has my permission to participate in Soaring Eagles classes, field trips, activities (with my prior approval) during the school year. I understand that I will be notified in writing in advance of the dates and locations of the field trips.

2. I agree to release Soaring Eagles, our host church, and any leaders or members from any claim for personal injury or damages resulting from my student's participation in any Soaring Eagles sponsored class or activity.

3. I give my permission for my child to travel with another SE parent with prior arrangements.

4. In the event of emergency or medical need, I give permission for SE leadership to seek medical care.

5. I release the following information about my child:

A. Physical problems/limitations/learning disabilities

B. Current Medication

C. Drugs/Allergies

D. Name and phone number of physician

E. Emergency contact in case I am unable to be reached

F. If the above student is covered by medical insurance please list the name and policy number below:

As the parent or legal guardian of the above named student, I am authorized to sign this permission form.

I HAVE READ AND UNDERSTAND THIS PERMISSION FORM AND UNDERSTAND THAT SOARING EAGLES CO-OP, ITS LEADERSHIP, ITS MEMBERS AND ITS HOST CHURCH ARE RELEASED FROM LIABILITY AS A RESULT OF ANY INJURY OR DAMAGES FROM MY CHILD'S PARTICIPATION IN ANY SOARING EAGLES SPONSORED CLASS OR ACTIVITY. I ALSO UNDERSTAND THAT IN THE EVENT OF EMERGENCY OR MEDICAL NEED, I HAVE GIVEN MY PERMISSION TO HAVE MY CHILD RECEIVE MEDICAL TREATMENT BY THE BEST MEANS AVAILABLE.

Date

Parent signature and address



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2011-2012 Financial Obligations

1. Fees are due by the second Monday of the month.
2. Once you become a member of SE you are committed to the financial obligation for the full year.
3. Refer to the parent manual for information on teacher reimbursements.

Signature



Soaring Eagles Homeschool Group

2011-2012 Photo-Use Clause

(Separate form for each student)

Soaring Eagles uses photos of its members on its website and on other documents. Every precaution for student safety is taken. Student's names and personal information are never posted in conjunction with the photograph. Please check the appropriate line below.

_____ Yes! My child's photo may be used.

_____ No! I decline to have my child's photo used.

Child's Name

Parent Name

Date



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2011-2012 Parent Responsibilities

1. Commit to teaching 1 class or support role for the year.
2. Commit to teaching a second class or assisting in a class for the year.
3. Attend parent training on Aug. 13, 2011.
4. Check email and website communications regularly.
5. Pay fees on time.
6. Help supervise students - even when you are not teaching.
7. Attend the monthly parent meetings.
8. Help put on various academic or social functions for our students by providing food, location, supervision, decorations, etc. to make Soaring Eagles functions memorable events for our kids. There will be a coordinator in charge of academic functions and one in charge of social functions, but those people will need parents to assist them.
9. Oversee that assignments are completed at home.
10. Show initiative – if something is not working or needs to be done, don't just identify it - help fix it.

Signature



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2011-2012 Registration Form

(Separate form for each student)

Student Name _____

Student Age _____ Student Grade _____

Student's E-mail _____

Parent's Names _____

Address _____

City and Zip Code _____

Home Phone _____ Cell (Mom) _____ (Dad) _____

Emergency Contact _____

Parent's E-mail _____

Class Selections:

First Day

Please list all classes needed during each block. If study hall is needed please indicate so.

8:30-10:00 _____

10:00-11:30 _____

12:45-2:15 _____

2:15-3:45 _____

Second Day

Please list top four choices according to preference.

1. _____

2. _____

3. _____

4. _____