Child's full name _____

Child's date of birth _____

Child's address_____

Guardian name(s)_____

Guardian phone number(s) _____

Guardian occupation(s) _____

Has your child been to school before? If so, what school?_____

Family home language(s)_____

Child's race and/or ethnicity_____

What else should we know about your child? (interests, personality, significant life events, behavior challenges, goals…)

_____

_____

_____

_____

_____

_____

_____

_____

_____

Should we know anything about your child's health? (allergies, medications, sensitivities, individual care needed…) *If an individual care plan is required or medication is to be taken at school, additional forms will be required.

_____

_____

_____

_____

_____

_____

_____

_____

_____

Child's primary care physician name and phone number:

_____

Last physical exam date:

_____

Child's dental care provider name and phone number:

_____

Last dental exam date:

_____

Tell us about your family culture. (Holidays/religion/traditions that you'd like us to know about, sensitive relationships to be aware of, cultural identities that we can celebrate…)

What else should we know about your family? (siblings, birth place, hobbies, goals, skills you have to offer, fun facts, pets…)

How do you know when your child is upset or dysregulated?

What helps them become more calm and centered?

Are you worried about anything for your child as they enter this school year?

What are you looking forward to this school year for your child?

Photo permission- check one:

☐ Barefeet Farm School **does** have permission to use photos and videos of my child's face on their Instagram page @barefeetfarmschool, Facebook page, and barefeetfarmschool.com, as well as for general marketing purposes.

☐ Barefeet Farm School **does not** have permission to use photos and videos of my child's face on their Instagram page @barefeetfarmschool, Facebook page, and barefeetfarmschool.com, or for general marketing purposes.

In addition to parent/guardians:

Emergency Contact 1 Name:_____

Phone Number: _____

Relationship to Child: _____

Emergency Contact 2 Name:_____

Phone Number: _____

Relationship to Child: _____

Additional people authorized to pick up child from school: (name and phone number)

_____
_____
_____
_____
_____

BFS has permission to… (check if applicable)

- ☐ Apply sunscreen to my child
- ☐ Apply hand sanitizer to my child
- ☐ Apply hand lotion to my child
- ☐ Apply deet free/essential oils based bug spray to my child

Acknowledgements:
by signing below you agree to the following.

I have read and I understand the Family Handbook, including: (check boxes to agree)

- ☐ Safety protocols surrounding the pond
- ☐ Safety protocols regarding campfires
- ☐ Acknowledgment of Risk and Liability Waiver
- ☐ Physical restraint policy
- ☐ Expulsion policy
- ☐ Risk/benefit analysis preparation
- ☐ Notification of the importance of child developmental screenings

- ☐ My child may eat food prepared by other children's guardians, provided my child is not allergic to the food or ingredients.

- ☐ I am aware that there are donkeys, a horse, and dogs on the BFS premises.

- ☐ In the event of a medical emergency, Barefeet Farm School has my consent to seek medical care and treatment for my child.

Parent/Guardian Printed Name:_____

Parent/Guardian Signature:_____

Date:_____

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(360) 441-2275

Optional Addendum:

Do you have any theories about your child that you'd like to share? (any birth trauma, astrological information, special tricks that help, parental inklings, family patterns, medical wonderings…)

Notes (questions, comments, concerns, etc.)