

# Renaissance Academy

## Emergency and Driver Information

Family Name: \_\_\_\_\_ / \_\_\_\_\_  
Primary Number

**\*Please list, in order, the persons to be contacted in case of an emergency, including yourself:**

- | 1) | Name | Relationship | Daytime Phone Number / Cell Phone | Vehicle (Color, Make/Model) |
|----|------|--------------|-----------------------------------|-----------------------------|
| 2) | Name | Relationship | Daytime Phone Number / Cell Phone | Vehicle (Color, Make/Model) |
| 3) | Name | Relationship | Daytime Phone Number / Cell Phone | Vehicle (Color, Make/Model) |
| 4) | Name | Relationship | Daytime Phone Number / Cell Phone | Vehicle (Color, Make/Model) |

Please list any other drivers authorized to pick up your child/children,

| Name | Relationship | Vehicle (Color, Make/Model) |
|------|--------------|-----------------------------|
| Name | Relationship | Vehicle (Color, Make/Model) |

Do any of your enrolled children have any medical conditions or allergies? \_\_\_\_\_

Child(ren)'s Physician: \_\_\_\_\_ / \_\_\_\_\_  
Phone Number

We/I understand that our child/ren may from time to time participate in various activities that involve elements of physical activity and may result in personal injury. We/I understand that some of the activities in which our/my child/ren may be engaged involve transportation to and from the site of the activity. We/I understand that elementary students leave campus regularly for sports and enrichment activities and we/I give permission for our/my child/ren's full participation and transportation. We/I hereby release and waive any present and future claims for injury or property damage that our/my child/ren may suffer while enrolled at Renaissance Academy.

In the event of a medical or dental emergency in which we cannot be contacted, we/I hereby authorize Renaissance Academy to give or withhold consent for medical or dental treatment. We/I understand that all expenses associated with such medical or dental emergency shall be our/my sole expense and I/we hereby agree to indemnify, defend, and hold harmless Renaissance Academy and its delegates from all such expenses.

We/I hereby grant permission to Renaissance Academy and its successors and assigns, to reproduce and publish photograph(s)/video of us/me and/or our/my child/ren in educational publications, promotional materials, videos, television footage, and web sites pertaining thereto.

We/I have read this form and fully understand that by signing we/I are/am affecting legal rights and/or remedies that may be available to us/me. This consent is given voluntarily as we/I believe it is in the best interest of our/my child/ren. It shall be effective as long as any child of ours/mine is enrolled at Renaissance Academy.

\_\_\_\_\_ Date

\_\_\_\_\_ Signature of parent or guardian

\_\_\_\_\_ Printed name of parent or guardian

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### **\*Important Notes\***

**Allergies** - Renaissance Academy does have visiting animals and classroom pets at school on a regular basis.

**Drivers** - Renaissance Academy will provide you with two ID cards for the front windshields of your vehicles. The card must be clearly visible on the passenger side of the front windshield at dismissal time for our staff member to release your child. Additional car cards may be obtained from the office.

**Please make sure the Renaissance window sticker and the id# cards are displayed at dismissal time.**

Typically, at dismissal time a staff member will watch the parking lot with students waiting nearby. The staff member will call student names as their vehicle arrives. Students will be walked to their cars by a teacher or assistant in the order of the car line. Drivers are required to follow all Indiana seatbelt laws.

If you are arriving before or after regular class arrival/dismissal time, including during Before or After School Camp, please park your car and come in with/for your child.

Please call the office and let us know anytime someone other than the primary drivers will be picking up your child. Any driver without the car card and/or that the assistant does not recognize may need to park his/her vehicle and come into the office with proper identification to pick up your child.

**Student and Family Information** – Information provided by parents on these forms is used for planning and implementing educational programs in the best interests of the child, and to help maintain student safety. Family and student information does not affect student admission. Completed forms are required for enrollment.

**Illness or Emergency** – If your child becomes ill or we need to contact a guardian during the day, Renaissance staff will first call home and then call down the emergency numbers in the order listed. A child sent home ill may not return to school until he/she is clear of symptoms for at least 24 hours, without the use of fever reducing medications.

### **Records, Forms and Fees required before your child's first day of school:**

**Student Transcript Request** (complete and return, we send to the previous school)

**Birth Certificate** (copy)

**Medical Form** (filled out by physician)

**Proof of Indiana Residence** (copy of driver's license, utility bill, etc.)

**Fees** (Materials and Tech Fees)

**Checklist of Enrollment Forms along with all required forms**

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*Renaissance Academy Charter School welcomes students of any race, religion, color, national, and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. Renaissance Academy does not discriminate on the basis of race, religion, color, national or ethnic origin in administration of its educational policies, admissions policies, and athletic and other school administered programs.*