

Bluebonnet Club Registration Form



Name: _____

Classroom Teacher: _____

Grade: 3 4

Parent's Name: _____

Emergency Contact:

Name: _____ Phone: _____

Email Address: _____

(Bluebonnet Club will use email as main method of correspondence)

Note:

Students may attend the club whenever they are interested in the particular book being read and discussed by group and Librarian. Students do not have to attend Bluebonnet Club for all three books. Students should attend the for the book(s) they want to receive Bluebonnet credit.

Please check:

_____ I would like to help with Bluebonnet Club.

_____ I understand 1-2 hours of my time will be needed to help with the club.

*Some things I will need assistance with are: reading, crafts/activities, carpool assistance, photography, snacks.

_____ My child will walk home from Bluebonnet Club.

_____ My child will ride his/her bike home from Bluebonnet Club.

_____ My child will be picked up by 4:10 pm in the carpool line in the bus lane on the North side of the building. Students will be dismissed from the 3rd grade hallway exit.

*Students not picked up by 4:10 will return to the library where they may be picked up as soon as their ride arrives.

People allowed to pick my child up from Bluebonnet Club:

Name: _____ Phone: _____

Name: _____ Phone: _____

Name: _____ Phone: _____

My child _____, has my permission to attend Bluebonnet Club on Tuesday's from 3:00-4:00pm.

Signature _____

Please return this form to Mrs. Green by September 16th