



2436 Sacramento St
Berkeley, CA 94702
(510) 540-8646

Family Registration Form

Part I: Student Information

Student's name: _____ Pronouns: _____

Uwf gpv'u"go ckn" _____ Uwf gpv'r j qpg< _____

School: _____ Grade level for current school year: _____

Date of birth: _____ School year: _____

Parents/Guardians:

Name(s): _____

Address: _____

Home phone: _____ Work phone: _____

Cell phone: _____ Email: _____

Place of employment: _____ Position held: _____

Parent/Guardian 2 (if necessary):

Name(s): _____

Address: _____

Home phone: _____ Work phone: _____

Cell phone: _____ Email: _____

Emergency Contact:

Name: _____ Relation: _____

Daytime phone: _____ Evening phone: _____

Please check this box **and** initial at the end to allow us to use written correspondence from you and/or images of your child in our promotional materials both printed and on-line.
Initials: _____

Part II: Student Information

(All information will be kept confidential)

Please describe your student's academic strengths:

Please describe your student's academic needs:

Has your student had tutoring in the past? If so, please describe.

Has your student ever been assessed for learning differences? If so, please describe the diagnosis.

Are there any medical concerns or medications we should be aware of?

Is your student involved with a therapist or doctor with whom you would like us to be in contact? If so, please provide contact information.

Please describe your expectations for your child during their time at Classroom Matters.

What would you like your child's tutor to know:

Part III: Please read and sign below

Classroom Matters is a holistic tutoring center that works with students and their families. For this reason, we need commitment from students as well as their parents or caregivers in order to help each student achieve academic success. In addition to one-on-one and group tutoring, our services include teacher contacts, session reports sent via email after each session and in-center family meetings to discuss issues surrounding students' academic success when necessary (billed at the tutoring rate). Families are expected to help students arrive and be picked up on time for tutoring, be willing to support students' academic work at home, be available by phone or email for contact and in-center family meetings when necessary.

I, _____, parent/guardian of _____, have read the above statement. I am willing and able to meet the stated expectations.

Please return completed form to Classroom Matters: frontdesk@classroommatters.com
2436 Sacramento Street, Berkeley, CA 94702.

Parent/Guardian Signature

Date