

THE HARBOR

We meet in the Fireside Room during second service at 11:00A every Sunday at the Knoxville Campus

Student Intake Form

Date: _____ Student's name: _____ Birth date: _____

Parents' Names: _____

Parents' Address: _____

Parents' Email: _____ Phone (home): _____ (cell): _____

Back-up emergency person/number: _____

Siblings (names and ages): _____

School student attends: _____

Student grade level: _____

Specific type of disability: _____

T-Shirt Size: __ XS __ S __ M __ L __ XL __ XXL

Can your student serve as a "Well Wisher?" __ yes __ no

Is your child on any medication? __ yes __ no

Types: _____

Seizures? _____ Allergies? _____

Foods/drinks we should not give your child? _____

Is assistance needed with eating/drinking? _____

Is help needed for personal hygiene? _____

Communication skills: _____

Reading level: _____ Writing level: _____

What are your child's strengths? _____

Child's understanding of God/relationship with Christ: _____

Activities child enjoys most: _____

Any particular fears: _____

Does your child have any behaviors that might disrupt a Sunday school class? If so, what do you normally do to modify his/her behavior? _____

Are there specific triggers that tend to cause your child to become anxious? _____

What sorts of things soothe your child when he/she is anxious? _____

Any additional information we should know? _____

For Parents/Guardians/Caregivers, please sign the following agreement:

I understand that there is an expectation that I will be attending service while my child/care-receiver is attending The Harbor, and I will be on site for the entirety of my child/care-receiver's time in The Harbor.

Parents/Guardians/Caregivers