School use: _____ _____ _____
Teacher Grade RT period

2026- 2027 Released Time Bible Education Student Enrollment Form

PLEASE COMPLETE ALL THREE (3) PAGES OF THIS FORM. IF ANY PART DOES NOT APPLY, PLEASE ENTER "N/A" IN THE BLANKS. INCOMPLETE FORMS WILL BE RETURNED.

I. ATTENDANCE AND TRANSPORTATION PARENTAL PERMISSION (REQUIRED)

(Print Student name) _____.
I _____, the parent/guardian of the student's name listed above give permission to attend the Released Time Bible Education (RTBE).

I understand that RTBE is a non-credit course and is designed to add to my child's education with religious and moral instruction. I understand that this class is not designed to conflict with or replace required credit classes. Students are responsible for school assignments missed during RTBE classes. I also understand that this is a permanent consent form; it will allow my child to attend RTBE until he/she is withdrawn or changes schools.

I further understand that I can remove my child at any point from the program upon written notice, and likewise, the program has the right to dismiss any student from the program for disciplinary issues or for being disruptive. Under the Behavior Contract (see Part IV enclosed) discretion for dismissible offenses is up to the sole discretion of RTBE leadership.

I understand that the RTBE students and the RTBE bus(es) are fully insured with accident and liability insurance in the event of any emergency. I understand that this consent form will allow my child to attend RTBE for this school year and gives written consent for my child to ride the RTBE bus to and from school and the designated class location.

I hereby signify that I am over eighteen (18) years of age, and I am the parent or legal guardian of the student identified above.

_____ _____
Parent Signature Parent Name Printed

_____ _____ _____
Street Address or P.O. Box City Zip

Phone #s: _____ _____
Home Cell

Best Email Address for **Parent:** _____

Student's T-shirt size (Circle one) XS S M L XL 2XL
No Youth Sizes

If you attend a Church, we would love to know

Churches name _____

II. PERMISSION TO TAKE PHOTOGRAPHS (REQUIRED)

Please indicate below whether you give RTBE and its legal representatives the right and permission to use or publish photographs, videos, or other media of my student participant and his/her image. I make my decision understanding that these photographs and/or videos may be used in publications, including electronic publications, or in audio-visual presentations, promotional literature, advertising, or other similar ways.

_____ **YES**, I give permission to RTBE, its directors, staff, and volunteers to make photographs of my child in connection with RTBE and its activities.

_____ **NO**, I do not give permission for my child to be photographed in connection with RTBE.

_____ _____

Parent Signature Date

III. STUDENT MEDICAL RELEASE INFORMATION (REQUIRED)

I, the parent/guardian, understand that every effort will be made to contact me in case of emergency. However, permission is hereby granted to the adult volunteer/staff of RTBE to authorize treatment by a physician to perform necessary treatment, including injection, anesthesia, or surgery for my child until such time s I can be reached.

_____ _____

Parent Signature Student Name Printed

Insurance Information

Hospitalization insurance: Company_____ Policy # _____
Name of Policy Holder: _____

Health Considerations

Does your child have **allergies**? _____ If so, please list them: _____
_____

Does you child take prescription **mediation(s)**? _____ If so, please list them: _____
_____

Does your child need **special accommodations** or **handicap accessibility**? _____ If so, please list what is needed: _____

_____

Emergency Contacts

Primary Contact: _____ _____ _____

Name Relationship to Student Phone Number

Secondary: _____ _____ _____

Name Relationship to Student Phone Number

Family Physician: _____ Phone #: _____

Family Dentist: _____ Phone #: _____

Preferred hospital: _____

IV. RTBE BEHAVIOR CONTRACT

- I promise to be respectful by treating others, students, and adults, as I would like to be treated.
- I promise to follow the rules.
- I will keep my emotions under control, especially my anger. I will not act aggressively or become destructive when angry. I will instead talk about my feelings with an adult with RTBE.
- I will be honest in all my interactions. I will not lie, cheat, or steal in order to get my needs met.
- I will not bully others. I will stand up for those being bullied and will report bullying to my RTBE teachers.
- I will be patient, forgiving, and fair.

Attending RTBE is a privilege. Failing to follow the Behavior Contract can lead to dismissal from RTBE. I understand that any decisions regarding compliance with the Behavior Contract is up to the sole discretion of RTBE leadership.

_____ _____

Parent Signature Student Signature

V. END-OF-YEAR FIELD TRIP PERMISSION FORM —April 2026

Each year the RTBE Board sponsors a field trip for the students who have had regular attendance in the RTBE program for that school year. These trips offer an exciting exploration of the Great Commission of our Lord Jesus Chris (Matthew 28:16-20).

Each student who attends must be actively enrolled at the time of the field trip. **The dates for these field trips will be announced later; Field trips are usually held during the month of November or December for winter sessions and April or May for spring session.**

I give my child, _____, permission to attend the RTBE field trip. I understand the date will be announced later.

_____ _____

Parent Signature Date