



PATHWAYS ACADEMY

Stepping Stones Associate Family Registration Form

Parent/Guardian's Names: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Alternate Phone: _____

Email Address: _____

Student's Name	Age	M/F?	Birth Date
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Was your family a Stepping Stones Member last year? YES or NO?

Cover school membership (if applicable): _____

Families who are not in need of a legal covering (all children under 6 years old) and families enrolled in other area cover schools are invited to join Pathways Academy as associate members. Associate membership will allow attendance at Pathways' field trips and events. Families may also choose to become members of the Pathways Academy Service Clubs- JR Beta (4th-8th), SR Beta (9th -12th), K-Kids (3rd-5th), Builder's Club (6th-8th) or Key Club (9th-12th). However, please note that Club registration fees are not included in the Associate Family fee. Families are also invited to join our Facebook Pages, and our private Yahoo Group, and the private side of our school website for homeschool information, advice, and support.

The mission of the Stepping Stones Associate Family program is to inform, encourage, and support local families, especially families with preschoolers who plan to home school when their children reach mandatory age; prospective families who are prayerfully considering homeschooling in the future, and local homeschool families who are seeking social interaction through the clubs, field trips, and activities offered by Pathways Academy throughout the school year.

Please note: This program will not fulfill the legal requirements of a church covering. Alabama state law requires all children, 6-17 years of age, be enrolled with a church school, private school, or public school.

**To join, please submit this registration form and the signed Family Liability Release Form (which can usually be found on the back side of this registration form) along with your \$25 membership fee (per family) to:
Pathways Academy, P.O. Box 411 Gadsden, AL 35902**

PATHWAYS ACADEMY

LIABILITY RELEASE FORM

As the Parent/Guardian of:

(Please list full names of all children to be involved in the Stepping Stones Associate Family Program)

As the parent/guardian of the child(ren) listed above, I do hereby agree to assume full responsibility for myself and my child(ren) while attending Pathways Academy events and activities and while on school property.

I understand that Pathways Academy, its Administrators, Pastors, School staff, Coordinators, Instructors, and Club Sponsors, will in no way assume responsibility financially or otherwise for accidents that occur to myself or my child(ren) during any School or club-related activities, or on property associated with Pathways Academy.

I also understand that Pathways Academy, its Administrators, Pastors, School staff, Coordinators, Instructors, or Club Sponsors will in no way assume responsibility financially or otherwise for legal action that may be taken against any family or child(ren) associated, enrolled, or otherwise admitted to Pathways Academy.

I do hereby release, discharge, indemnify, and hold harmless Pathways Academy, its Administrators, Pastors, School staff, Coordinators, Instructors, and Club Sponsors from all charges, liability, claims, demands, actions, judgments and executions.

PRIMARY TEACHING PARENT/GUARDIAN -

Parent/Guardian's Full Name: _____
(Please print)

Primary Teaching Parent/Guardian's Signature

Date

SPOUSE OR PARENT/GUARDIAN WITH FULL or JOINT CUSTODY -

Each parent/guardian who currently has full custody of or shares joint custody of any of the children to be enrolled with the Stepping Stones Associate Family program, must also sign and date this form.

I have read the above statement and do hereby release, discharge, indemnify, and hold harmless Pathways Academy, its Administrators, Pastors, School staff, Coordinators, Instructors, and Club Sponsors from all charges, liability, claims, demands, actions, judgments and executions.

Parent/Guardian's Full Name: _____
(Please print)

Signature

Date