	Parent / Gua	ardian of	Is	enrolling in
All day Camp/Lesso				
Name				
Age Sex	Date of B	sirth		
Address		City	State	
Phone	Or		_	
Parent/Guardian na	me			
In case of emergen	•			
	PI	ione		
Allergies				
Special Instructions				
If parent is not here	to pick up chi	ld the child ma	y be released	
to	_, Or		<u> </u>	
With proper ID ONL	Υ!			
Parents remember	we are a licen	se boarding fa	cility so if you are s	igning up for
the all day class we	are not licens	ed teachers w	e will just supervise	e your childrer
while they do their of	online schoolin	ıg.		
	X_		_	
Parent Signature				
Date				