## ROBERTS “MAKING OF A RED FOX”

# 2024 REGISTRATION FORM

CHILD’S NAME:

BIRTH DATE: / / CHILD’S AGE: CHILD’S GRADE:

RACE: W B O SEX: M F

GUARDIAN NAME:

ADDRESS: ZIP CODE:

E-MAIL ADDRESS:

EMPLOYER: WORK PHONE: ( ) -

CELL PHONE: ( ) -

GUARDIAN NAME:

ADDRESS: ZIP CODE:

E-MAIL ADDRESS:

EMPLOYER: WORK PHONE: ( ) -

CELL PHONE: ( ) -

The following individuals are allowed to pick up this child and may be contacted in case of an emergency:

EMERGENCY CONTACTS DAY PHONE RELATIONSHIP TO CHILD

( ) -

( ) -

( ) -

List any medications, allergies or limitations requiring special attention:

My child may participate in Redemptive Love Farm:Yes No

My child may be in photographs or videos taken during the program for program use only: Yes No

My child may watch a G or PG rated family movie during Camp: Yes No

I understand my child will need to follow any Covid-19 Guidelines set by LCS: Yes No

**I have read and fully understand the policies outlined in the Extended Day Enrichment Program Policy Statement (located on the back). It is clear that I must have my payment in the EDEP office on or before the payment due date or a $10.00 late charge will be assessed. My fee will be paid on time even if my child does not attend on the actual due date. I understand that my child must be picked up by 6:00 p.m. every day, or a $1.00 per minute late fee will be assessed.**

PARENT SIGNATURE: DATE: / /

My Child will be attending: June 24 - June 28 or July 29 – August 2