



**“Fun with Friends” FREE Play Group  
Simsbury High School  
January 2019**

**Free program; reserve your spot!**

This is a first-come, first-served opportunity, so don't delay if you are interested. Completed form can be submitted multiple ways:

-drop it off at the high school main office

-take a photo with your phone and email it to [gszatrowski@simsbury.k12.ct.us](mailto:gszatrowski@simsbury.k12.ct.us)

-fax to 860-658-1576

-or send it by mail to:

Gail Szatrowski, Simsbury High School, 34 Village Farms Rd. Simsbury, CT 06070

Child's name:

Date of Birth:

Nickname (if applicable):

Address:

**Contact Info:**

Parent name:

Occupation:

Primary Phone number:

Secondary Phone number(s):

Parent name:

Occupation:

Primary Phone number:

Secondary Phone number(s):

**Emergency Contacts:**

Name:

Phone:

Relationship:

Name:

Phone:

Relationship:

List only those individuals that may pick up your child (your child will only be dismissed to these individuals and will be initially asked to provide identification):

Does your child have any allergies? If yes, explain AND identify medications required in the event of an allergy attack (these need to accompany child to play group).

Does your child have any chronic medical conditions (illnesses, play/activity restrictions)? If yes, explain.

Does your child have any issues that we should know about?

Is there any other information you would like to share about your child?

Will you allow your child's photograph to be used for district purposes (website, open house, classroom use)?

Upon receipt, you will receive confirmation. Please send my confirmation information via:

email; my email is:

text; my cell phone # is:



**The students are anxious to meet your preschooler; see you soon!!!**