

Rebelcare Registration

There is a \$25.00 per child non-refundable registration fee that will be charged to your FACTS account. The registration fee includes new and old students.

Personal Information

Child's Name _____ Grade _____ Teacher _____
Child's Name _____ Grade _____ Teacher _____
Child's Name _____ Grade _____ Teacher _____
Child's Name _____ Grade _____ Teacher _____

Home Address _____
City _____ State _____ Zip _____

Father's Name _____ Cell Phone _____
Employer _____ Work Phone _____
Email _____

Mother's Name _____ Cell Phone _____
Employer _____ Work Phone _____
Email _____

Pick Up and Emergency Contacts

Please list below who may pick your child up from Rebelcare and / or is able to make medical decisions for your child(ren) listed below.

Name _____ Phone _____
Name _____ Phone _____
Name _____ Phone _____

Please list all concerns, allergies or special information that we need to know about your child. _____

Doctor's Name _____ Phone _____
Hospital Preference _____ Phone _____

This certifies that permission is given to TRA to seek medical treatment for the names listed above, in the event that parents or emergency contacts cannot be reached immediately.

Signature of Parent/Guardian _____ Date _____

Rebelcare Contact
Mrs. Rebecca Downing, Rebelcare Director
Cell 901-4961039
Email: rdowning@rebelmail.net