

North LaFayette Elementary After School Child Care Program
RAMBLER REACH REGISTRATION FORM

Name of Child _____ Teacher _____ Grade _____

Birth Date _____ Address _____

City _____ Zip _____

Father's Name _____ Home # _____ Cell # _____

Place of Employment _____ Work # _____

Mother's Name _____ Cell # _____

Place of Employment _____ Work # _____

Guardians Name _____ Cell # _____

Place of Employment _____ Cell # _____

In case of emergency (and parents/guardians above can not be reached) CALL:

Name: _____ Home # _____ Cell # _____

Name: _____ Home # _____ Cell # _____

SPECIAL INSTRUCTIONS: (allergies, diet, medical, extraordinary circumstances including custody situations)

Please list any condition (s) that would limit your child's participation in GROUP activities. This program is designed for students who are able to participate independently in age-appropriate activities.

In addition to the above information, the following people may pick up my child from the Rambler Reach program. Please note that no one can pick up your child unless they are listed on this form or without a signed note written by the parents or legal guardian that signed them up for the program (a picture ID may be required).

Name	Phone #
_____	_____
_____	_____
_____	_____

Parent/Guardian's Signature _____ Date _____