



Pavilion Childcare Programming 2017/2018

Child's Name: _____ Gender M F

Child's Birthdate: _____

Current Grade: _____

Prim. Guardian Name: _____

Prim. Guardian Address: _____

Prim. Guardian Email: _____

Prim. Guardian Home Phone: _____

Prim. Guardian Work Phone: _____

Prim. Guardian Cell Phone: _____

Guardian #2 Name: _____

Relationship to Child: _____

Guardian #2 allowed to pick up? _____

Guardian #2 Work Phone: _____

Guardian #2 Cell Phone _____

Emergency Contact #1 Name: _____

Emergency Contact #1 Phone: _____

Emergency Contact #2 Name: _____

Emergency Contact #2 Phone: _____

List necessary medical info about child: _____

To participate in this program the registrant _____
 needs a modification because of a disability. (please circle) YES NO

Pick Up 1: _____

Pick Up 2: _____

Pick Up 3: _____

Pick Up 4: _____

Circle Program:

- Homeschool PE Fall
- Kids' Night Out
- Winter Break Camp
- Homeschool PE Winter
- Spring Break Camp

Notes: _____