



**EMERGENCY CONTACT INFORMATION:**

*Please indicate below the person/s to be contacted in the case of an emergency (when the parent/guardian cannot be reached):*

A. **Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Relationship:** \_\_\_\_\_

B. **Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Relationship:** \_\_\_\_\_

**Does your child have special learning needs?**  No  Yes

Learning Disability – Classification: \_\_\_\_\_

Other: Please explain: \_\_\_\_\_

**Are there any health conditions of which we should be aware? If so, please explain:**

\_\_\_\_\_  
\_\_\_\_\_

**Are there any other special instructions? (Dismissal, transportation, etc.)** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Are there any custodial issues?**  No  Yes. **If yes, please explain:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**For Administrative Use Only:**

**Circle Reason for Waitlisted:**

No Baptismal on File    Last year's summer student did not attach stamped card

Payment Not Received

**Parent/Legal Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_