

**EARLY ARTS INFORMATION SHEET  
SUMMER REGISTRATION 2010**

FEE \_\_\_\_\_

CK # \_\_\_\_\_

*\$50 Registration Fee*

**PLEASE PRINT**

Child's Name \_\_\_\_\_  
Child's Birthday \_\_\_\_\_ Age \_\_\_\_\_ Gender: M / F  
Parent's Names \_\_\_\_\_  
Address \_\_\_\_\_  
Home Phone \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
EMAIL \_\_\_\_\_

Class Days Preferred (Please Circle): Rising 3 year olds: M/W or T/TH  
Rising 4K: M/W or T/TH

Sessions Preferred (Please Circle):

SESSION 1 June 7 – June 24 - \$155 Due by May 1<sup>st</sup>  
SESSION 2 July 5 – July 22 - \$155 Due by May 1<sup>st</sup>

Hours: 9am – 1pm

**IMPORTANT CONTACT NUMBERS**

Mother's Cell Phone \_\_\_\_\_ Father's Cell Phone \_\_\_\_\_  
Mother's Work Phone \_\_\_\_\_ Father's Work Phone \_\_\_\_\_  
Other Phone numbers \_\_\_\_\_  
Child's Physician \_\_\_\_\_ Phone Number \_\_\_\_\_

**EMERGENCY CONTACTS**

Persons to contact if parents cannot be reached in event of illness or injury:

1. Name \_\_\_\_\_ Relation \_\_\_\_\_ Phone \_\_\_\_\_  
2. Name \_\_\_\_\_ Relation \_\_\_\_\_ Phone \_\_\_\_\_

## Authorization to Release Child

Early Arts Preschool personnel are authorized by my signature below to release my child,  
\_\_\_\_\_ to the following persons:

Name \_\_\_\_\_ Relation \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Relation \_\_\_\_\_ Phone \_\_\_\_\_

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

## MEDICAL \ ALLERGIC CONDITIONS

Child's Medical \ Allergic Condition: \_\_\_\_\_

Child's Physical Reaction \ Response: \_\_\_\_\_

Treatment for Condition: \_\_\_\_\_

## Medical Authorization

Early Arts Preschool personnel are authorized by my signature below to seek medical assistance\ treatment if I am unable to be contacted in case of an emergency involving my child, \_\_\_\_\_ including transporting my child to Children's Hospital either by ambulance\ emergency vehicle or personal vehicle.

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

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## **DON'T FORGET YOUR BLUE FORM**

*Early Arts Center does not discriminate on the basis of race, sex, color, handicap or national and ethnic origin in administration of its educational policies and admission policies.*