Pavilion
Childcare Programming 2016/2017

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: _____

_____

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 Spring   Spring Break Camp

Notes: _____