CHILDREN'S NAMES (FIRST AND LAST)

	GRADE	
	GRADE	
	GRADE	
	GRADE	

PARENT/GUARDIAN INFORMATION

Mother/Guardian 1 Name:	FIRST LAST	
Home Phone:	Cell Phone:	Email:
Occupation/ Employer:		Work Phone:
Mother's Address:		
Marital Status: ☐ Married ☐ Single ☐ Divorced ☐ Separated ☐ Widowed ☐ Other		
Relationship to Child: ☐ Mother ☐ Father ☐ Grandparent ☐ Foster Parent ☐ Other		
Father/Guardian 2 Name:	FIRST LAST	
Home Phone:	Cell Phone:	Email:
Occupation/Employer:		Work Phone:
Father's Address		
Marital Status: ☐ Married ☐ Single ☐ Divorced ☐ Separated ☐ Widowed ☐ Other		
Relationship to Child: ☐ Mother ☐ Father ☐ Grandparent ☐ Foster Parent ☐ Other		

PERSONS AUTHORIZED TO PICK-UP/CONTACT IN CASE OF EMERGENCY

Please list persons authorized to pick up your child or to be notified in case of an emergency (other than parents). Photo ID will be required at the time of pick up. Your child will only be allowed to leave camp with those persons listed. All custody issues staff should be aware of.

Name	Relationship to child	Phone #
1.		
2.		
3.		

CHILD INFORMATION

1st Child's Name:	**Grade Entering:**
List any existing medical conditions, medications and/or special attention your child may require.	
Allergies:	

2nd Child's Name:	**Grade Entering:**
List any existing medical conditions, medications and/or special attention your child may require.	
Allergies:	

3rd Child's Name:	**Grade Entering:**
List any existing medical conditions, medications and/or special attention your child may require.	
Allergies:	

4th Child's Name:	**Grade Entering:**
List any existing medical conditions, medications and/or special attention your child may require.	
Allergies:	

I agree to all School and Extended Day policies/procedures as outlined in the Parent and School Handbook found on the school website school.stgerald.com and the Extended Day Parent Information Letter I received at the time of registration. This includes logging into my Blackbaud account every month on the 15th by 11:00pm to pay my Extended Day charges if my account is NOT set up on automatic payments.

Signature of Parent/Guardian	Date

FOR OFFICE USE ONLY: Enrollment Fee Received on	$	Check #	Cash