

DEEP RUN PRESBYTERIAN NURSERY SCHOOL REGISTRATION/EMERGENCY CONTACT FORM

(PLEASE PRINT CLEARLY & FILL OUT BOTH SIDES OF THIS FORM)

CLASS _____

CHILD'S NAME: _____ NAME USED AT SCHOOL: _____ M OR F

CHILD'S HOME ADDRESS: _____ DATE OF BIRTH: _____

MOTHER/GUARDIAN'S NAME: _____ EMAIL ADDRESS: _____

HOME PHONE NUMBER: _____ MOTHER'S OCCUPATION: _____

MOTHER'S CELL NUMBER: _____ WORK ADDRESS: _____

MOTHER'S WORK NUMBER: _____ DAYS/HOURS AT WORK: _____

FATHER/GUARDIAN'S NAME: _____

FATHER'S CELL NUMBER: _____ FATHER'S OCCUPATION: _____

FATHER'S WORK NUMBER: _____ WORK ADDRESS: _____

MARITAL STATUS OF PARENTS: _____ Name of person Financially Responsible for this child _____

CHILD RESIDES WITH: BOTH PARENTS _____ FATHER _____ MOTHER _____ OTHER (please list) _____

NAME OF ALL ADULTS LIVING IN HOUSEHOLD (OTHER THAN PARENTS):

RELATIONSHIP TO CHILD _____

RELATIONSHIP TO CHILD _____

NAME OF OTHER CHILDEN LIVING IN HOUSEHOLD

RELATIONSHIP _____ AGE _____

RELATIONSHIP _____ AGE _____

RELATIONSHIP _____ AGE _____

ARE THERE ANY PETS IN YOUR HOUSEHOLD? PLEASE LIST ALL PETS AND PETS NAMES.

If parents are not available, list 2 people (other than yourself) WITH TRANSPORTATION who will be available and willing to assume temporary care of your child. Please make sure these people know that you have used their name and telephone number for emergency purposes. (Local friend, Relative, Neighbor, Co Worker etc.)

EMERGENCY CONTACT #1 NAME: _____ RELATIONSHIP TO CHILD _____

HOME PHONE # _____ CELL PHONE # _____

EMERGENCY CONTACT #2 NAME: _____ RELATIONSHIP TO CHILD _____

HOME PHONE # _____ CELL PHONE # _____

Person(s) other than yourself authorized to transport your child to/from school, *including those in your carpool*: (If you want to make any changes during the school year, please do this in writing to the preschool office.)

Name	Phone Number	Relationship to child
_____	_____	_____
_____	_____	_____
_____	_____	_____