



## **After-School Program Registration Form 2017-2018**

Student #1: \_\_\_\_\_ Grade: \_\_\_\_ Teacher: \_\_\_\_\_

Student #2: \_\_\_\_\_ Grade: \_\_\_\_ Teacher: \_\_\_\_\_

Student #3: \_\_\_\_\_ Grade: \_\_\_\_ Teacher: \_\_\_\_\_

### Parent/Guardian Information:

Name: \_\_\_\_\_

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

Home#: \_\_\_\_\_ Work#: \_\_\_\_\_ Cell#: \_\_\_\_\_

### Emergency contact if parent cannot be reached:

Name: \_\_\_\_\_ Phone#: \_\_\_\_\_

Name: \_\_\_\_\_ Phone#: \_\_\_\_\_

Student(s) may be released ONLY to the following people other than their parent or guardian:

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Questions? Contact Laura Porter at (607) 437-8857 or SBC at (607) 965-8540 or [lauraporter71@yahoo.com](mailto:lauraporter71@yahoo.com)