

St Anthony Preschool (Summer)

1801 Winton Way, Atwater, CA 95301



(PLEASE FILL ALL BLANKS ON FORM COMPLETELY)

Summer Enrichment Program Registration Form 2021

Date _____ Current Grade _____

Student's Name _____ Home Phone _____
Last First Middle

Mailing Address _____ City _____ Zip Code _____

Father's Name _____ Cell Phone # _____

Mother's Name _____ Cell Phone # _____

Child is living with: Both parents ____ Mother ____ Father ____ Step Parent ____ Guardian ____

If Guardian, Give Name, Address, and Phone Number: _____

Siblings (include ages) _____

Last School Attended _____ City _____ State _____

Parent's Signature _____ Date _____

Parent's Signature _____ Date _____

Emergency Contact Information: In an emergency, if we are unable to reach you, whom else may we call? We must be able to reach someone in an emergency! A Family member, friend or neighbor.

Name _____ Phone Number _____

Name _____ Phone Number _____

Name _____ Phone Number _____

Medical Information

Allergic to:

Medications: _____ Foods: _____

Insects: _____ Plants: _____

Is student taking any daily medication? Yes/No What kind? _____

Medical Conditions: please complete if your child has a medical condition such as asthma, etc:

Doctor's Name _____ Phone Number _____

Dentist's Name _____ Phone Number _____

Insurance Carrier _____ ID Number _____

**Summer Enrichment Program runs June 21—July 16;
8am—noon; Monday-Friday. Cost \$275;
Registration \$30 due before first day of program.**

