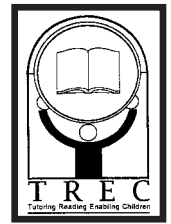


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MORRIS AREA COMMUNITY EDUCATION and University of Minnesota Morris TREC After School "Program" Enrollment Form



FAMILY INFORMATION SHEET (you only need to complete one per family)

PARENT/GUARDIAN INFORMATION:

Mother/Guardian's Name: Address:

Home Phone: Work Phone: Cell Phone:

E-mail

Father/Guardian's Name: Address:

Home Phone: Work Phone: Cell Phone:

E-Mail

STUDENT INFORMATION:

Student's Name Grade/Teacher Birthdate

Student's Name Grade/Teacher Birthdate

Student's Name Grade/Teacher Birthdate

EMERGENCY NUMBERS:

Please give the name, address and phone number of (3) three people that may be notified in case of emergency or illness, when parents or guardian are not available. These people should live in Morris. Please provide a telephone number where these people may be reached during the program hours.

Name Address Phone

Name Address Phone

Name Address Phone

AUTHORIZATION:

PERSONS AUTHORIZED TO PICK UP YOUR CHILD. Any changes in this list must be received from you in writing.

Name Phone

Name Phone

Name Phone

PERSON/PERSONS NOT AUTHORIZED TO PICK UP YOUR CHILD/CHILDREN:

Blank lines for names of persons not authorized to pick up children.

On behalf of myself and the student(s) listed above, I release the Regents of the University of Minnesota, Morris Area Community Education, the City of Morris, and Morris Area School, and each entities' employees, volunteers, and representatives, from any and all claims for damages or injuries arising out of participation in this program, including, but not limited to, damages or injuries suffered as a result of negligent acts or omissions. I do not release any entity from liability for intentional, willful, or wanton acts.

Parent/Guardian Signature: Date: