

*Parish Day School of Eastern Shore Chapel and Camp Turtle Trap
Registration Form*



Child's Full Name		Nickname	Date of Birth	Gender
Address	City	State	Zip code	Home Phone
Chronic Physical Problems/Pertinent Developmental Information/Special Accommodations Needed				
Email address (much of our information will be disseminated electronically)			Previous Children's Programs and Schools Attended	
If child attends this school and another school/program, list name of school/program				Grade

PARENT(S)/GUARDIAN(S)

Mother	Employer		Business Phone
Home Address	City	State	Zip code
Cellular Phone			
Father	Employer		Business Phone
Home Address	City	State	Zip code
Cellular Phone			
Person(s) or Agency Having Legal Custody of Child			Home Phone
Home Address/Business Address	City	State	Zip code
Business Phone			

EMERGENCY INFORMATION

Allergies or Intolerance to Food, Medication, Action to Take in an Emergency		Insurance, number, person insured		
Child's Physician		Physician's Phone		
Two People to Contact if Parent(s) Cannot Be Reached	Address	City	State	Zip
1.				Phone H- C-
2.				H- C-
Additional Person(s) Authorized to Pick Up Child				
Person(s) NOT Authorized to Pick up Child*				

* Appropriate paperwork such as custody papers shall be attached if someone is not allowed to pick up the child.
NOTE: Section 22.1-4.3 of the *Code of Virginia* states that unless a court order has been issued to the contrary, the noncustodial parent of a student enrolled in a public school or day care center must be included, upon request of the noncustodial parent, as an emergency contact for events occurring during school or day care activities.

(OVER)