



## Winthrop School Kids Care Club Registration Form

Child's Name \_\_\_\_\_ Grade \_\_\_\_  
Teacher \_\_\_\_\_

Child's Name \_\_\_\_\_ Grade \_\_\_\_  
Teacher \_\_\_\_\_

Parent/Guardian \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone (Home) \_\_\_\_\_  
(Work) \_\_\_\_\_ (Cell) \_\_\_\_\_  
Email address \_\_\_\_\_

Parent/Guardian \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone (Home) \_\_\_\_\_  
(Work) \_\_\_\_\_ (Cell) \_\_\_\_\_  
Email address \_\_\_\_\_

Emergency Contact \_\_\_\_\_  
Telephone \_\_\_\_\_

### Medical Information

Allergies \_\_\_\_\_  
Medications \_\_\_\_\_

Ideas to help others \_\_\_\_\_  
\_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_  
Date \_\_\_\_\_