

Lakewood City Schools
Community Recreation and Education Department

Child Information Form

OHIO HERITAGE Session (Please Circle)

Session 1
Session 2

Children will NOT be accepted on the day of camp without a completed Child Information Form on file.

PARTICIPANT INFORMATION (PLEASE PRINT)

NAME: _____ SEX: M F
ADDRESS: _____
House # Street City Zip
HOME PHONE NUMBER: _____
BIRTHDATE: _____ AGE: _____ CURRENT GRADE _____ SCHOOL: _____
PLEASE LIST ANY MEDICAL CONDITIONS/ALLERGIES/MEDICATIONS: _____

PARENT/GUARDIAN NAME (PLEASE PRINT): _____
EMERGENCY PHONE NUMBERS:

Mother/Guardian Cell/Pager: _____
Mother/Guardian Work: _____
Father/Guardian Cell/Pager: _____
Father/Guardian Work: _____
Other: _____

PICK-UP
Please print the name's of the people that have your permission to pick-up your child.
1. _____
2. _____

Please return form by June 1

By registering for any Lakewood Community Recreation and Education Department program, registrants agree to the Lakewood City Schools Community Recreation and Education Department Program Registration Wavier & Consent Policy. A copy of the policy is available at the Lakewood Community Recreation and Education Department, in the Community Education seasonal booklet, or online at www.lakewoodrecreation.com.

PARENT/GUARDIAN SIGNATURE

DATE