

**Coarsegold Union School District
EMERGENCY INFORMATION 2004-2005
After School Club
Cougar**

STUDENT _____ BIRTH DATE _____
TEACHER _____ GR _____ PHONE _____
MAILING ADDRESS _____ RESIDENCE _____
PARENT(lives with) _____ WORKPHONE _____ PAGER _____
PARENT(lives with) _____ WORKPHONE _____ PAGER _____
PARENT _____ WORKPHONE _____ PAGER _____
PARENT _____ WORKPHONE _____ PAGER _____

OTHER CHILDREN IN FAMILY AT COARSEGOLD SCHOOL:

STUDENT _____ TEACHER _____
STUDENT _____ TEACHER _____
STUDENT _____ TEACHER _____
STUDENT _____ TEACHER _____

MY CHILD MAY BE RELEASED FROM THE AFTERSCHOOL CLUB TO THE FOLLOWING:

NAME _____ PHONE _____
NAME _____ PHONE _____
NAME _____ PHONE _____
NAME _____ PHONE _____
NAME _____ PHONE _____
NAME _____ PHONE _____
NAME _____ PHONE _____
NAME _____ PHONE _____

DO NOT RELEASE MY CHILD TO _____ CUSTODY # _____

PARENT/GUARDIAN SIGNATURE _____

Child's Name _____

My Child will attend the following hours: (Notify Director of any changes.)

Monday from _____ to _____
Tuesday from _____ to _____
Wednesday from _____ to _____
Thursday from _____ to _____
Friday from _____ to _____

PARENT/GUARDIAN SIGNATURE _____