

Western Reserve Local School District

Staff and Students Excel
Parents and Community Care
Summer School Enrollment Form
August 1-12, 2011

Name of Student _____ Grade in Fall 2011-2012 _____
Address _____ City _____ State _____ Zip code _____

Name of Parent/Guardian _____ Home Phone _____
Work Phone _____

Alternate Contact _____ Phone _____
For an Emergency (Name of Person)

Alternate Contact _____ Phone _____
For an Emergency (Name of Person)

Medical conditions or allergies:

Please complete the above Emergency Authorization for summer school. Your child will be released by the summer school teacher to only the individuals listed on the form in case of illness. Please write the teacher a note indicating who will be picking up your child if he/she is not riding the bus.

Please return this form to Western Reserve Elementary by Tuesday, May 31, 2011

I wish to enroll my child _____ in the Western Reserve Summer School Program. I have received and read the attached letter of information concerning the summer school program.

Please check only ONE of the following:

***** NOTE:** Bus transportation is provided only for students enrolled in math and language arts.

I would like my child enrolled for language arts and math _____.

I would like my child enrolled for language arts only _____.

I would like my child enrolled for math only _____.

I am enrolling my child in both the language arts and math sessions and would like bus transportation.

Note: Please give the address that your child will be picked up and returned to for the summer bus transportation. We cannot make bus changes to this address as the bus routes will be developed and approved specifically for summer school.

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Signature of Parent

Date