

21st Century Summer Program 2023





Suwannee Pineview Elementary												
Student's Legal Name: Student ID:												
Homeroom Teacher:				Grade this				year:		Age:		
Residential Address:				Birthdate:					Hispanic:	Yes	_ No	
				City, State ZIP:								
Is a language other than English spoken in the home?				Yes No If yes, what language?								
List any allergies or known health information regarding your child:												
Race (Check all that apply): American Indian or Native Alaskan Asian Black or African American Native Hawaiian or Pacific Islander White Some Other Race Unknown												
Parent/Guardian's Name:												
Parent Contact Information Cell:			Home:						Work:			
Parent Email address:												
Emergency Contact's Name:				Phone					e:			
Person(s) Authorized to Pick Up and/or Check-Out Your Child												
Name:			Relationship:					Phone:				
Parent/Guardian Signature:								Today's Date:				
Please list siblings who attend school (grad				des K-5) in the district				School and Grade				
	l g	I give permission for my child to leave campus with 21st CCLC staff for local, walking field to give permission for photos and/or videos of my child to be posted and viewed on									field trips.	
Important											า	
Information! _	official school district websites and/or local media. I will make arrangements for my child to be picked up promptly at 12:00. I understand									tand		
Please check any	that my child could be dropped from the program as a result of late pick-ups.											
boxes that apply:												

*****IMPORTANT: Registration form must be signed by parent or guardian and child's participation acknowledged by the 21st CCLC Site Coordinator, by a phone call, before the child may participate in the program.