

21st Century Summer Program 2023 Monday - Thursday 8:00 - 12:00

June 5 - July 20, 2023



		Suwannee	Spri	ngcre	st	: Ele	men	tar	'Y		
Student's Legal Name:		Student ID:									
Homeroom Teacher:				Grade this year				ear:	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 land					guage?		
List any allergies or known heal	th in	formation regarding yo	our child	d:							
Race (Check all that apply): Am Hawaiian or Pacific Islander Parent/Guardian's Name:						Blac own	k or Afri 	ican A	merican_	Na	tive
Parent Contact Information Cell:				Home:					Work:		
Parent Email address:											
Emergency Contact's Name:				Phone					::		
Per	son	(s) Authorized to Pi	ick Up	and/or	Ch	eck-O	ut You	r Chi	ild		
Name:				Relationship:				Phone:			
Parent/Guardian Signature:				T				oday's Date:			
Please list siblings wh	o at	ttend school (gra	ides I	<-5) in 1	the	e dist	rict:	Scł	nool an	d Gra	de
	l give permission for my child to leave campus with 21 st CCLC staff for local, walking field trips.										
Important Information!	I give permission for photos and/or videos of my child to be posted and viewed on official school district websites and/or local media.										
Please check any		•	ny child to be picked up prompt d from the program as a result c				•	-			
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.