

SAFETY TOWN REGISTRATION FORM

June 2010

CHILD'S NAME: _____ DATE OF BIRTH: _____

PARENT/GUARDIAN'S NAME: _____

ADDRESS: _____

HOME PHONE: _____ WORK PHONE: _____

PERSON TO CONTACT IF PARENT/GUARDIAN CANNOT BE REACHED:

NAME: _____ RELATIONSHIP: _____ PHONE: _____

I would prefer that my child attend the (please check one Session and one Class type):

_____ Session #1 (June 14-18)

_____ Session #2 (June 21-25)

_____ Morning class (9am-11am)

_____ Morning class (9am-11am)

_____ Afternoon class (1pm-3pm)

_____ Afternoon class (1pm-3pm)

Will your child be coming from the Oberlin Early Childhood Center? YES NO

Does your child have any allergies (i.e., bee stings, food allergies, etc.)? YES NO

If so, please list _____

THE DEADLINE FOR REGISTRATION IS FRIDAY, MAY 28, 2010

Please return this form to the Oberlin Police Department or the Eastwood School secretary before May 28, 2010. Class size is limited, and registration is on a first-come, first-served basis. Any questions may be directed to Lt. Kevin Scalli, Oberlin Police Dept., 774-1061.

PERMISSION SLIP

I give permission for my child, _____, to participate in Safety Town and its field trips, which may include; safety walks and school bus ride to/from the Oberlin Fire Station, with the understanding that neither the Oberlin Police Department, City of Oberlin, Oberlin Schools or Oberlin Exchange Club is responsible for any accidents.

(Signature of parent/guardian)

(Date)