

# E.D.G.E.

Child's name: \_\_\_\_\_

Age: \_\_\_\_\_ Grade: \_\_\_\_\_ Birthdate: \_\_\_\_\_

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Age: \_\_\_\_\_ Grade: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Child's name: \_\_\_\_\_

Age: \_\_\_\_\_ Grade: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Parent/Guardian name: \_\_\_\_\_

Address: \_\_\_\_\_

Contact #: \_\_\_\_\_

Email address: \_\_\_\_\_

Emergency contact: \_\_\_\_\_

Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

Any known allergies or medical concerns:

\_\_\_\_\_

**WHO IS ALLOWED TO PICK UP YOUR CHILD?**

\_\_\_\_\_

**Community Covenant's Midweek program has specific guidelines for age levels, arrival/dismissal of kids and discipline procedures. By registering and signing this form, I am agreeing to support these policies.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_