

Homeroom Teacher:

Please circle 1 of the following:
Car Rider Bus Rider

2020-2021

**Terrace Manor Elementary
Summer School Registration Form**



Please check 1 option: Face to Face Virtual

Student's Information		
Last Name:	First Name:	Grade:
Street Address:	City:	State:
Parent/Guardian's Information		
Last Name:	First Name:	
Street Address:	City:	State:
Home Phone:	Cell Phone:	
Employer's Name:	Work Phone:	
Email Address:		
Emergency Contact #1		
Last Name:	First Name:	
Street Address:	City:	State:
Home Phone:	Cell Phone:	
Relationship to Student:	Work Phone:	
Email Address:		
Emergency Contact #2		
Last Name:	First Name:	
Street Address:	City:	State:
Home Phone:	Cell Phone:	
Relationship to Student:	Work Phone:	
Email Address:		
Medical Information		
Please list any allergies, medicines or other medical issues related to your child. If any medication must be administered by the school, please make sure we have a medication form completed by your child's physician.		