



Midkota Public School Extended School Day/Summer School Participant Registration Form School Year: 2020 - 2021

Participant Name	Date of B	irth	
Grade			
Gender () Male () Fema	ale *How many family members	s live in your home	
Ethnicity () American Indian/Alaska N () Hispanic or Latino	Native () African American () White	() Asian/Pacific Islander	
Special Services or Programs Proficiency	(_	cation or IEP () Limited English) Eligible for Free or Reduced-Price Meals ation for participation in the NESC 21st CCLC Program	
Parent/Guardian (1)	Rela	Relation	
Address	Cit	City/Zip	
Mobile/Cell #	Home #	Work #	
Email			
Parent/Guardian (2)	Relation		
Address	City/Zip		
Mobile/Cell #	Home #	Work #	
Email			
Before School Programming (site open		ne Before School Program:	
What is the approximate time you	ur child will arrive for the morning p	orogram(s):a.m.	
Days attending the After School Progra	m (site closes at 5 PM): _)Monday ()Tuesday ()The	ursday	
•	pp/depart from the after school pome outlying areas of our school di	•	
Walk () Home or (Other, please specify where if o	other than home	
Picked up by parent/gua	ardian:		
What is the appro	ximate time your child will be picke	ed up each day: p.m.	
My child will need bus	transportation to:		

IN CASE OF EMERGENCY, WHO MAY WE CONTACT:		
Contact 1:		
Relationship to Child:		
Phone number:		
Contact 2:		
	<u> </u>	
Relationship to Child:		
Phone number:		
Is there anyone prohibited from picking up your child: () Yes Name(s) of person(s) prohibited from picking up your child		
May we take photos of your student during 21st CCLC activities: () Yes or () No	
Medical Information: () Allergies		
() Medication		
In case of an early dismissal (typically something weather related)), how will your student (get home:
	For off	ino uno
	Date Received:	ice use
	Program Start Date	