



Sun Prairie Parks and Recreation Department Summer Program Child Information Form

General Information

Participant's Name: _____ D.O.B.: _____ Age: _____ Grade: _____
 Address: _____ City: _____ Zip: _____
 Parent/Guardian #1's Name: _____ Parent/Guardian #2's Name: _____
 Cell Phone: (_____) _____ Cell Phone: (_____) _____
 Home Phone: (_____) _____ Home Phone: (_____) _____
 Work Phone: (_____) _____ Work Phone: (_____) _____
 E-mail: _____ E-mail: _____

Emergency Contacts/Authorized Persons to Pick Up

Individuals we can contact (in order) if you cannot be reached and ONLY those authorized to pick up your child:

Name: _____	Phone: (_____) _____	Relationship: _____
Name: _____	Phone: (_____) _____	Relationship: _____
Name: _____	Phone: (_____) _____	Relationship: _____
Name: _____	Phone: (_____) _____	Relationship: _____

Please list all Sun Prairie Parks and Recreation Programs your child is signed up for this summer:

(This information will help us transfer your Child Information Form to all other programs they are registered for this summer)

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Conditions Requiring Special and/or Emergency Care

Please note that this information is kept in confidence and only shared with program staff and administrators.

- Asthma
- Diabetes
- Epilepsy
- ADD
- Allergies: _____
- Medication to be taken during program hours: _____
- ADHD
- Autism
- Developmentally Disabled
- Other: _____

Note: If your child requires medication during program hours, an authorization to administer medication form MUST be filled out, signed by child's physician and submitted prior to their first day of attendance. To request a form, please visit rec.cityofsunprairie.com, e-mail rec@cityofsunprairie.com or call the Parks and Recreation Department at (608) 837-3449.

Any other information you would like to share with Staff regarding your child?:

Parent/Guardian Signature: _____ Date: _____

Note: Please return this form to the Parks and Recreation Department **PRIOR** to the first day of class by faxing to (608) 825-0716, emailing to rec@cityofsunprairie.com, or mailing/dropping off at 2598 West Main Street, Sun Prairie WI 53590. If returning **ON or AFTER** the first day of class, please return directly to program staff.