

RAISE Registration Form

Read. Art. Innovate. Serve. Engage.

RAISE is an after-school program for grades 6 to 8 from the Effingham County area. Students from all public and private schools in the county, along with homeschooled students, are encouraged to register.

Applicant's Name: _____

Age: _____ **Date of Birth:** _____

Grade: _____ **School:** _____

Does student need transported from school to library? YES or NO

Primary Parent/Guardian Name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: _____

Email: _____

Secondary Parent/Guardian Name: _____

Phone: _____

Email: _____

Medical: Does your child have any medical conditions, such as allergies, that we need to be aware of? (Circle) YES NO

If yes, please explain: _____

If your child requires medication, including OTC, please complete the medical authorization form attached.

Emergency Contacts: Please list in order of preference individuals we may contact in the event of an emergency.

Name: _____ Phone: _____

Name: _____ Phone: _____

Authorized Pick Up:

Name: _____ Phone: _____

Name: _____ Phone: _____

Filling out this enrollment form is required for attendance. Enrolling in the program does not mean that the student must come every day. Once the enrollment form is on file, the library will provide a monthly sign-up sheet.

Please sign to acknowledge that you and your child understand and will follow the policies of the After-School Program and Effingham Public Library.

Parent Signature _____