Jump Start 2019

Nazareth Area School District's Summer Program

July 29th – August 8th

Monday-Thursday -8:30AM-11:30AM

Name of Child:_____

(first and last name)

My child is entering **FIRST GRADE** for the **2019-2020** school year.

Name of Parent/Guardian_____

Street Address _____

P.O. Box_____

City/State/Zip Code_____

Home Phone # _____ Cell Phone # _____

E-mail address _____

Student Allergies _____

Medications_____

_____

Medical Conditions _____

_____

Name of emergency contact person(s) _____

Telephone number(s) of emergency contact person(s) _____

Person(s) responsible for pick-up and drop-off _____

Telephone number of person(s) responsible for pick-up and drop-off _____

Name of Sibling(s) in Summer Program_____Grade_____

Please return this registration form (along with a $60.00 check made payable to the NASD (Nazareth Area School District) to your child's school office by Friday, April 26, 2019.