## The Verge Contact Form 5th-8th Grade Students

ISD #110 Community Education 516 Industrial Blvd. - Waconia, MN 55387 - 952-442-0618 / 952-442-0610

Child's Name:			Primary Phone:			
E-Mail Address:						
Home Address:					Zip:	
Mother's Name:			-			
Father's Name:						
Birthdate:						
List any known allergies:						
Does your child have any s			Does your child hav		No	
Name(s) of authorized pers	on(s) to pick up your child(	ren):				
			•			
This form must be tu of attendance. The  Emergency Contact Informs sume responsibility for care	Summer program ha	as a \$75 S	Supply Fee due p	orior to stu	dent's 1st day.	
, ,	-	•	Dhana #			
Name #1:			Phone #:			
Relationship:			Alt. Phone #:			
Name #2:			Phone #:			
Relationship:			Alt. Phone #:			
Physician:			Phone:			
Dentist:			Phone:			
By signing this registration cy treatment, or to give the all charges that apply with h	necessary first aid if I cann					
I grant permission for my cheking and also for field trips		gram during	the day under the sup	pervision of a s	staff member for walks,	
Parent/Guardian Signature:			Date:			
		Verge Cha	arges			
Summer:	Supply Fee:\$75		Daily Rate: \$35	ā a day (nee	d Auto Pay Form)	
School Year:	\$7 per time	or	\$75 Punch	Card (15x)		
Punch cards are availa Out. Students may also students or at The Ver	ble for purchase at Wo	aconia Cor	nmunity Education	n and The V		