

# MARIN YMCA BEFORE/AFTER SCHOOL REGISTRATION 2019-2020

**NOVATO**     Pleasant Valley     Loma Verde     Rancho     San Ramon     Hamilton  
**ROSS VALLEY**     Manor     Brookside     Hidden Valley     Wade Thomas  
**SAN RAFAEL**     Sun Valley

## APPLICANT INFORMATION

Student Name \_\_\_\_\_ Gender  M  F Birthdate \_\_\_\_\_  
Home Address \_\_\_\_\_ Grade \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Start Date \_\_\_\_\_ E-mail \_\_\_\_\_

### Parent/Guardian #1 (Emergency Contact & Authorized To Pick-Up Child)

Name \_\_\_\_\_ Birthdate \_\_\_\_\_  
Primary Phone \_\_\_\_\_ Secondary Phone \_\_\_\_\_ Occupation \_\_\_\_\_

### Parent/Guardian #2 (Emergency Contact & Authorized To Pick-Up Child)

Name \_\_\_\_\_ Birthdate \_\_\_\_\_  
Primary Phone \_\_\_\_\_ Secondary Phone \_\_\_\_\_ Occupation \_\_\_\_\_

## ADDITIONAL AUTHORIZED PICK-UPS/EMERGENCY CONTACTS & ADDITIONAL INFORMATION

Pick-Up #1 Name \_\_\_\_\_ Pick-Up #1 Phone \_\_\_\_\_  
Pick-Up #2 Name \_\_\_\_\_ Pick-Up #2 Phone \_\_\_\_\_

List Allergies \_\_\_\_\_

Medications your child takes \_\_\_\_\_

Anything else we should know about your child \_\_\_\_\_