

Miss Sue's Nursery School

Due 8/18/17

Child's Name: _____

Child's Date of Birth: _____

EMERGENCY NUMBERS- MAY TAKE FROM BUS OR SCHOOL

	Name	Cell Phone	Home/Alternate Phone	Relationship
Parent:	_____	_____	_____	
Parent:	_____	_____	_____	
Other:	_____	_____	_____	_____
Other:	_____	_____	_____	_____
Other:	_____	_____	_____	_____
Other:	_____	_____	_____	_____
Other:	_____	_____	_____	_____
Other:	_____	_____	_____	_____

FOR OFFICE USE ONLY Class- _____ Bus- _____