

POJOAQUE VALLEY SCHOOLS BEFORE AND AFTER PROGRAM & SUMMER REC PROGRAM

WHEN

June 5th - August 4th
7am - 6pm

WHERE

Pojoaque Valley Intermediate
School

1574 State Rpad 502 West, Santa Fe, NM

FEATURING • **Field Trips** • **Experiential Learning** •
Games • **Recreation** • **Free Lunch at the High School** •
Fun for all



STUDENTS

This program is for
students ages 5 through
5th grade

REGISTRATION

Pojoaque Valley
Intermediate School

Date: June 5, 2017

Time: 8:00 am

COST

Summer Rec: \$50

(June half day program)

B & A:

\$50 per month (1/2 day)

\$100 per month (full day)

PARTNERS

Pojoaque Valley Schools

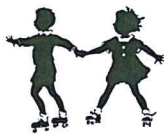
Santa Fe County

Summit Foods

Mathilde Schaumberg
Director
(505) 455-4042

pojoaque Valley Schools

_____ date enrolled



Before and After School Program

CHILD'S NAME _____ GRADE _____
_____ GRADE _____

DATE OF BIRTH _____ GENDER _____
_____ GENDER _____

HOME ADDRESS _____ HOME # _____

PARENT/GUARDIAN NAME _____ WORK# _____
_____ WORK# _____

**EMERGENCY CONTACTS:
PLEASE LIST 2 PERSONS TO BE CALLED IN AN EMERGENCY (OTHER THAN PARENTS)**

NAME _____ PHONE# _____
NAME _____ PHONE# _____

LIST PERSONS WHO ARE AUTHORIZED TO PICK UP YOUR CHILD:

NAME _____ PHONE# _____
NAME _____ PHONE# _____

PLEASE LIST ANY ALLERGIES OR MEDICAL CONDITIONS YOUR CHILD MAY HAVE:

**PLEASE GIVE US THE NAME AND TELEPHONE NUMBERS OF YOUR CHILD'S PHYSICIAN AND/OR
EMERGENCY MEDICAL FACILITY AUTHORIZED IN CASE OF EMERGENCY.**

NAME OF PHYSICIAN _____ PHONE # _____

NAME OF FACILITY/HOSPITAL _____ PHONE # _____

PERMISSION TO TRANSPORT/TREATMENT TO HOSPITAL _____ (PLEASE INITIAL)

I have received a copy of the parent handbook _____ (please initial)

PARENT/GUARDIAN SIGNATURE

DATE

*SEE BACK PAGE

PVSD SUMMER EDUCATION & RECREATION PROGRAM
PARENTAL PERMISSION FORM

Dear Parents,

Pojoaque Valley School District is pleased to announce that we will be offering a Summer Education & Recreation program this year. It includes Reading, Math, Science and Art along with Physical Education and Health Awareness. The program will also provide two freshly cooked USDA approved meals (breakfast and lunch) for all students attending. This program will begin Monday June 5th and continue Monday through Friday 8:00 am – 1:30 pm until Friday June 30th.

Admission into the Summer Education & Recreation Program is \$50 per student, to be paid at the time of enrollment.

If you are interested in your child participating, please fill out the rest of this notice and return it to school as soon as possible.

Participant Name:

Grade:

I give permission for my child (named above) to attend the Pojoaque Valley School District's Summer Education & Recreation Program. I have provided the **enrollment fee** in the form of _____ (if check, please provide check # and make payable to PVSD.)

Signature of Parent or Legal Guardian

Printed name of Parent or Guardian

Date

EMERGENCY CONTACT INFORMATION

Parent(s)/Guardian(s)

Name(s)

Street Address

City

State

Zip

Phone Numbers Phone Type (Home, Mobile, etc.)

Phone Numbers	Phone Type	(Home, Mobile, etc.)

Parent(s)/Guardian(s) Email address(es)

Best Email address(es) to reach Parent(s)/ Guardian(s)

**Please provide contact information for at least 2 other people who we may contact in the event that you cannot be reached. These should be people who have your permission to pick up your child.

1. _____ Phone # _____

2. _____ Phone # _____