



SAIL REGISTRATION

SUMMER ADVENTURES IN LEARNING



STUDENT & PARENT INFORMATION

Student Name :

Student's School :

Date Of Birth :
D D M M Y Y

Grade During 2023-2024 :

Student's Shirt Size :

Parent/Guardian Name :

Address :

City :

Zip Code :

Parent/Guardian Phone :

Phone if Parent/Guardian Cannot be Reached :

Emergency Contact Name :

Emergency Contact Phone Number :

Describe Student's Medical Issues, if None, Write N/A

STUDENT TRANSPORTATION NEEDS:

Will Student need Transportation? : Yes No If Yes, Check Transportation Need : Need TO and FROM Donoho Transportation

Need TO Donoho only

If Yes, Check Pickup Location : Carver Center

Need FROM Donoho only

Wiggins Center

South Highland Center

Meeting Center

* PERMISSION & EXPECTATIONS:

***Note:** Every student will be required to take a pre-test prior to enrollment in the program.

Permission Statement:

I have read and understand the Program Guidelines which include following regular City of Anniston Parks Recreation Rules and Guidelines as indicated at the beginning of this process. I understand that the guidelines, provisions, and user responsibilities of the City of Anniston Parks & Recreation program, including Internet and Technology Acceptable Use Policy, are to be followed. I grant permission for my child's data to be shared for grant reporting. I grant permission for my child to participate in any field trips conducted as a part of the program. I understand that my child may be photographed or videoed during camp activities for publicity or grant reporting. I understand that I must notify the City of Anniston Parks and Recreation Dept. in writing if pictures/videos are not permitted. **I understand that PERFECT attendance is a part of this agreement.**

Parent/Guardian Signature :

Date :