



Odem-Edroy Independent School District
Latchkey Program
Registration Form / Forma de Inscripción
2019-20

Student's Full Name/Nombre: _____

Date of Birth / Fecha de nacimiento: ____/____/____ Teacher/Maestra(o): _____ Grade/Grado: _____

Address/Dirección: _____

My child has permission to: Please check the following

☐ Be picked up

☐ Walk Home

*Students walking only certain days will need a written note from parent

Mother's Name/Nombre de madre: _____

Phone Number/Teléfono de: Home/Casa: _____ Work/Trabajo: _____ Cell/Celular _____

Father's Name/Nombre de padre: _____

Phone Number/Teléfono de: Home/Casa: _____ Work/Trabajo: _____ Cell/Celular _____

Siblings Attending OEISD Schools

Name	Age	School Attending
_____	_____	_____
_____	_____	_____
_____	_____	_____

Alternate people who have permission to pick up your child/Algunas otras personas que tienen permiso para recoger a su niño:

Name/Nombre: _____ Relation to child/Relación al Niño: _____

Name/Nombre: _____ Relation to child/Relación al Niño: _____

Emergency Contact/Contacto en caso de emergencia:

Name/Nombre: _____ Emergency Phone #/Numero de emergencia: _____

Please list any pertinent medical information (allergies, physical handicaps) of which we should be aware of/Liste por favor información médica pertinente (alergias, las desventajas físicas) de que debemos estar enterados de:

Disruptive, disrespectful or other prohibited behavior is reason for disciplinary action including removal from the program. Perturbar, irrespetuoso, y otra conducta prohibida es razón de castigo incluyendo eliminación del programa.

- ☐ Yes, I hereby grant permission to use my child's name, picture, art, written work, voice, or picture (video or still) to appear in any school publicity or publication, school buildings, school videos, or website.
- ☐ No, I **do not** want my child's name, picture, artwork, voice, or picture (video or still) to appear in any school publicity or publication, school buildings, school videos, or website.

Parent's Signature / Firma del Padre

Date / Fecha