

Student
Information
And
Parental
Agreement Form

"Train up a child..."

Coeur d'Alene Christian School

SUMMER SCHOOL

"Cougar Care"

6439 N. 4th Street, Dalton Gardens, ID 83815
(208) 772-7118 www.cdachristian.org

Student Information

Name _____ DATE _____

Last First Middle

Address _____

City _____ State _____ Zip _____

Telephone _____

Age _____ Sex _____ Birthdate _____

School last attended _____ Last Grade Completed _____

Address _____

HOW DID YOU HEAR ABOUT US? _____

Family Information

Father's Name _____

Employment _____

Position _____ Business Phone _____

Father's cell phone _____

Mother's Name _____

Employment _____

Position _____

Mother's cell phone _____

EMAIL ADDRESS: _____

Emergency Phone Numbers (other than numbers above - 2 please)

_____ ; _____

Married ___ Divorced ___ Widowed ___ Separated ___ Single ___

Other Children in Family:

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Medical Information

Family Physician _____ Phone _____

Does student have any physical defects or allergies? _____

Explain: _____

Is Student taking any daily medications? _____

Explain: _____

Scholastic Information

Please indicate academic level of student's previous work:

Excellent: _____ Good _____ Average _____ Poor _____

Has student ever been diagnosed with any learning disabilities? _____

Explain: _____

Has student ever failed a grade or subject in school? _____

Explain: _____

Has student ever been expelled, dismissed, suspended or refused admission to another school? _____ Explain: _____

Has student ever had disciplinary difficulties? _____

Explain: _____

Has student ever been in trouble with the law, arrested, etc.? _____

Explain: _____

Has student ever used tobacco or drugs of any kind? _____

Explain: _____

Late fees will be charged on all past due accounts.

**I understand that if proper arrangements are not made on past due accounts, my child will not be allowed to continue in school.

**I give permission for my child to participate in all school activities, including sports and school-sponsored trips away from the school premises, and absolve the school from liability to me or my child because of any injury to my child at school or during any school activity.

Medical Release Form

I, _____ (Parent/Guardian) hereby give permission for any and all medical attention to be administered to my child, _____ in the event of accident, injury, sickness, etc., under the direction of the person(s) listed below, until such time as I may be contacted. I release Coeur d'Alene Christian School from any responsibility in the case of accident or injury to my child. I also assume responsibility for the payment of any treatment received.

Address: _____

Home phone: _____

Insurance Carrier/Policy Number: _____

In case I cannot be reached, any of the following persons is designated to act on my behalf:

Care Provider: _____ Shelia Bucher _____

Physician: _____

Address: _____

Phone: _____

Known Allergies: _____

Signature (Parent/Guardian) _____

Date _____

CCS Field Trip
Driver / Permission Form

**I, _____, can drive my child
(children) plus _____ other people for the
field trip to/on:**

OR

**I give my permission for my son/daughter,
_____, to ride with another
parent for this field trip with Coeur d'Alene
Christian School.**

Signed: _____
(Parent/ guardian)

Date: _____



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(208)772-7118

PERMISSION FORM

Regarding photo's to become public.

___ I give my permission for Coeur d'Alene Christian School to post my child's pictures from school events/activities to Facebook, other social media, newspapers, yearbook, and/or the CCS website.

Signed _____ Date _____

(printed name) _____

OR

___ I DO NOT GIVE PERMISSION (I do not want my child's picture posted to any of the above mentioned sites.)

(printed name) _____



Summer School Cougar Information

Hours of operation: 7:45 am to 5:30pm

Dates of operation: June 13th-August 26th

Closed Monday, July 4th

Closed August 29th-September 2nd for school year preparation

Cost: \$20.00 per day (2 children--\$30.00, 3 children--\$40.00)

Teacher: Shelia Bucher (699-0556) email:buchsunker@msn.com

Age and Requirements

Children ages 3 through 11 may attend Camp Cougar. Children must be potty trained to attend.

Lunch and snacks

Parents will provide snacks and lunch for their child each day. Morning and afternoon snack time will be scheduled each day. Please be sure your child has enough food and drinks to last all day.

Payment Schedule

Payment is due on first of each month. Please pay fees in full unless approved by teacher in advance. There will be a fee of \$10.00 per day for late payments. **Make checks payable to CCS.**

Clothing

Please be sure children are prepared with weather appropriate clothing. Some time will be spent outside each day. Sunscreen and extra clothes may be brought and left in your child's cubby. Wet clothes are needed for Wednesday's on sprinkler or pool time.

Parent Agreement

I have read and agree to all information on this sheet including payment policies and schedule.

Parent signature _____ Date _____



Summer School Cougar Registration

1st Child's Name _____ Age _____ Birthday _____
 2nd Child's Name _____ Age _____ Birthday _____
 3rd Child's Name _____ Age _____ Birthday _____

Mother's name _____ Phone # _____
 Address _____
 Email _____ Cell # _____
 Employer _____ Phone # _____
 Texting Ok Yes Or No (Circle one)

Father's name _____ Phone # _____
 Address _____
 Email _____ Cell # _____
 Employer _____ Phone # _____
 Texting Ok Yes Or No (Circle One)

Emergency contacts

Name _____ Phone # _____
 Name _____ Phone # _____
 Name _____ Phone # _____

Child's doctor _____ Phone # _____
 Any medical concerns? _____

Any allergies? _____

Days your child (children) will be attending Summer School Cougar Care.
 Fill out the calendar for the month of June, July and August. Return them with
 your monthly payment before the first of each month.

June 2017

Sun	Mon	Tue	Wed	Thu	Fri	Sat
28	29	30	31	1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	1

2017 JULY

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
30	31					1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29

2017 AUGUST

SUN	MON	TUE	WED	THU	FRI	SAT
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		