

**Grass Lake Middle School
2010-2011**

GRADE _____

Student's Name _____ **Date of Birth** _____

Student's Address _____ **City** _____ **zip** _____

Please check this box if student/household does not have internet access

Mother/Guardian Name _____

Mailing Address _____

Custodial Parent? Yes _____ No _____ **Home Phone** _____ **Work Phone** _____

Cell Phone _____ **Email** _____

To be used for daily homework/announcements emails

Father/Guardian Name _____

Mailing Address _____

Custodial Parent? Yes _____ No _____ **Home Phone** _____ **Work Phone** _____

Cell Phone _____ **Email** _____

To be used for daily homework/announcements emails

Student's Last Name _____
First Name _____

Automated Calling System Emergency Numbers – In addition to using local radio and television stations to inform our school families of closures, delays, early dismissals, extreme weather condition information, or any emergency for which parents need to be informed, Grass Lake Community Schools uses an automatic calling/notification system. Below please submit up to six (6) numbers, by priority, which you would like to be called in the event that an emergency notification must be made. A minimum of one (1) number is required.

Note #1: In the event of a school delay or cancellation, or a cancellation of events outside of school hours **“Phone Number 1” will be the only number called.** In these situations the system will confirm that you answered the phone or a message has been left, or it will try a second time. At that point the calls will stop.

Note #2: In the event of an unscheduled early dismissal, an afternoon bus delay due to severe weather, or an emergency for which we feel we need to make contact with all families immediately, **each number will be called until someone is reached AT EACH NUMBER.** There will be up to 10 attempts. The multiple call scenario will happen very rarely, but will be a valuable tool in the event that we need to ensure we have made contact with all families. In the event of an early dismissal, students will be sent to their normal after-school locations.

	Name of Person Being Called	Phone Number
Phone Number 1		
Phone Number 2		
Phone Number 3		
Phone Number 4		
Phone Number 5		
Phone Number 6		

****Is there anyone we should NOT release student or student's information to? Yes _____ No _____**

Please list names _____ If applicable, please attach legal papers.

MEDICAL INFORMATION

Doctor Name _____

Address _____ City _____ Phone _____

Medication(s) your student is allergic to _____

Other Allergies _____

If your student has a medical condition such as asthma, please describe _____

Other important medical information you would like us to have _____

In case of an emergency, I want my son/daughter taken to _____ hospital.

PLEASE LIST TWO PEOPLE WE CAN CONTACT IN CASE OF AN EMERGENCY IF A PARENT CANNOT BE REACHED. A CONTACT PERSON SHOULD LIVE NEARBY OR IS OTHERWISE READILY AVAILABLE.

Name _____ Phone _____

Name _____ Phone _____

In the event none of the designated people can be reached, or an extreme emergency arises, the school has the authority to take necessary action to protect the health and well being of the student named above; including seeking emergency or hospital care as may be deemed necessary under the circumstance.

If there is an early dismissal due to power outages, weather, etc..., I want my son/daughter sent to:

In this event, I give my son/daughter permission to walk home _____ Yes _____ No

In this event, my son/daughter may be picked up by _____

My son/daughter, _____ has my permission to attend any school sponsored trips during the 2010/2011 school year. _____ Yes _____ No

Grass Lake Community Schools has my permission to use photographs of my son/daughter for Newspaper _____ Yes _____ No On school website on the internet _____ Yes _____ No

Student Signature _____

Mother/Guardian Signature _____

Father/Guardian Signature _____