## LYNC

Letting Your Neighbor Care Child's Information

Please complete a form for **each** child who will be attending LYNC this summer.

Child's Name:	Geno	der:I	Viale	Female	Age:	
Birthdate:	Scho	ol:				
Grade Currently Enrolled:	Towr	Township:				
Does your child have any allergies or m Please describe.	need to be awa	re of?	Yes		No	
Is your child currently taking any prescr Please list medications and			Yes rience.	No		
Is child currently a 4-H member?	Yes	No				
Does your child qualify for free or reduc	ced lunches?	Yes _	No			
Has your child been identified by the so	chool as below proficie	ency in reading?	Yes		No	
Does your child have an IEP/504 plan of	or is identified to be at	t risk by school p	personnel?	Yes		No
Are there current court orders related to to your child?	o the custody of your	child or restrict a	a named person fi	om having acc	ess	
If yes, please provide docur	mentation.					
Yes	No					
Please list any additional information the most important behavioral, social, and	-					
T-Shirt Size (Included in registration fe Youth Small (6-8) Youth Medium (10-12) Youth Large (14-16)	ee)	Adult Sma Adult Medi Adult Larg		i XL)		
		Adult XL				
SWIMMING PERMISSIC  My child, summer on scheduled swim days. Swi permission for my child to walk with the LYNC staff and voluteers will be in atte a swim test before being allowed in the Community Church and all LYNC staff No child entering kindergarten will be p	has no many many many many many many many many	church parsona pool. I understa supervision at al cident or injury s child is required	and that there will I times. I understa hould occur, I agr	the lawn from L be a lifeguard of and that all child ee to hold harm	YNC. I give on duty, and dren must pass nless Jefferson	
Non-Swimmer Beginning Swim		e Swimmer	Advanced Swimm	ner		
Parent/Guardian Signature		Date				