

Helpful Information:

Reason for Selecting PDO: _____

PDO Recommended By: _____

If parents are separated or divorced, with whom does the child reside?

Name

Relationship

Parent's Address (if Different from Child's Address):

_____ **Home/Cell Phone:** _____

Release of Child

**Names of people to whom the child may be released:
(In addition to those already listed on page 1 of the enrollment form)**

Name _____ **Relationship** _____

Home Phone: _____ **Work:** _____ **Cell:** _____

Name _____ **Relationship** _____

Home Phone: _____ **Work:** _____ **Cell:** _____

Name _____ **Relationship** _____

Home Phone: _____ **Work:** _____ **Cell:** _____

Parents' Denominational Preference: _____

Location of Membership: _____

Active Member: Yes _____ Somewhat _____ No _____

Does your child have any disabilities or restrictions that would require special services or restrict him/her from any physical activities? If so, please relate details.
