

# ACTIVITY, CLASS OR CAMP FORM

If your child will be attending camp/class/activity (i.e. soccer, basketball or bible camp, gymnastics) during Kids Play/Club Knights, please fill out this form.

**We do not provide transportation to/from activities.**

Child's First & Last Name \_\_\_\_\_

Grade 2018-19 \_\_\_\_\_

## CLASS/ACTIVITY/CAMP (Use a separate form for each child)

- Name of class/activity: \_\_\_\_\_ Dates: \_\_\_\_\_  
Time: Leaving at \_\_\_\_\_ returning at \_\_\_\_\_ (for health reasons, we cannot hold pizza after 12:00pm on Mon/Fri)  
Will your child: \_\_\_\_\_ Walk \_\_\_\_\_ Be picked up \_\_\_\_\_ Bussed (Kids Play does not provide bussing)  
If your child is being picked up for an activity provide name of person doing so: \_\_\_\_\_
- Name of class/activity: \_\_\_\_\_ Dates: \_\_\_\_\_  
Time: Leaving at \_\_\_\_\_ returning at \_\_\_\_\_ (for health reasons, we cannot hold pizza after 12:00pm on Mon/Fri)  
Will your child: \_\_\_\_\_ Walk \_\_\_\_\_ Be picked up \_\_\_\_\_ Bussed (Kids Play does not provide bussing)  
If your child is being picked up for an activity provide name of person doing so: \_\_\_\_\_



Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

Return form to Kids Play/Club Knights staff or fax to 763-497-6584 or email to [LisaB@STMA.K12.MN.US](mailto:LisaB@STMA.K12.MN.US)



# Summer School Form

*Kids Play/Club Knights does not provide bus transportation to/from summer school.*

Child's First & Last Name \_\_\_\_\_

Grade 2018-19 \_\_\_\_\_

**St. Michael Elem.** (Monday thru Thursday from June 17-27 and July 8-18)

\*Someone will walk your child to/from the Comm. Ed. Center to St. Michael Elem before and after Session 1 or Session 2.

\_\_\_\_ Session 1 (7:30-9am) Will your child need to be walked **to** St. Michael Elem? \_\_\_\_ Yes \_\_\_\_ No (parent will drop off at school)  
Will your child need to be walked **back** to Comm. Ed? \_\_\_\_ Yes \_\_\_\_ No (parent will pick up from school)

OR

\_\_\_\_ Session 2 (9:30-11am) Will your child need to be walked **to** St. Michael Elem? \_\_\_\_ Yes \_\_\_\_ No (parent will drop off at school)  
Will your child need to be walked **back** to Comm. Ed? \_\_\_\_ Yes \_\_\_\_ No (parent will pick up from school)

**NOTE:** if you register for session 1 your child should be able to make most field trips.

**OTHER**, please indicate school \_\_\_\_\_ Dates \_\_\_\_\_ Time \_\_\_\_\_

**\*\* If your child is at summer school and will not be attending a fieldtrip, please let us know in advance.**



Parent Signature \_\_\_\_\_

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