



**Prairie Care Participant  
Information Sheet**

**CHILD'S NAME** \_\_\_\_\_ **GENDER** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_ **CITY** \_\_\_\_\_ **ZIP** \_\_\_\_\_

**BIRTHDATE** \_\_\_\_\_ **HOME PHONE ( )** \_\_\_\_\_ **GRADE IN FALL 2019** \_\_\_\_\_

**MOM'S CELL #** \_\_\_\_\_ **DAD'S CELL #** \_\_\_\_\_

**E-MAIL ADDRESS:** \_\_\_\_\_

**FATHER'S NAME** \_\_\_\_\_ **OCCUPATION** \_\_\_\_\_

**BUSINESS ADDRESS** \_\_\_\_\_ **BUSINESS PHONE** \_\_\_\_\_

**MOTHER'S NAME** \_\_\_\_\_ **OCCUPATION** \_\_\_\_\_

**BUSINESS ADDRESS** \_\_\_\_\_ **BUSINESS PHONE** \_\_\_\_\_

Persons authorized to pick up your child (list parents' names & any car pools). Photo identification will be required. **Your child will not be allowed to leave the Prairie Care with anyone not listed unless special arrangements have been made by the parent or guardian.**

	<u><b>NAME</b></u>	<u><b>RELATIONSHIP</b></u>	<u><b>PHONE #</b></u>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

Persons to contact in case of emergency or illness. List people who are available to pick up your child, if necessary. Persons authorized to pick up your child are:

	<u><b>NAME</b></u>	<u><b>RELATIONSHIP</b></u>	<u><b>ADDRESS</b></u>	<u><b>PHONE #</b></u>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

# OVER

DOES YOUR CHILD HAVE ANY HEALTH PROBLEMS? \_\_\_\_\_

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HAS YOUR CHILD PREVIOUSLY BEEN ENROLLED IN A BEFORE/AFTER SCHOOL PROGRAM?

Yes \_\_\_\_\_ No \_\_\_\_\_ Where \_\_\_\_\_

May your child have his/her picture taken while at Prairie Care? Yes \_\_\_\_\_ No \_\_\_\_\_

Are your child's immunizations current? Yes \_\_\_\_\_ No \_\_\_\_\_

*If no, please explain.*

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IS THERE ANY SPECIAL CONSIDERATIONS OR NEEDS THAT MAY COME UP AT PRAIRIE CARE, INCLUDING ALLERGIES AND MEDICATIONS TAKEN DURING PRAIRIE CARE?

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***All paperwork must be turned into our business office prior to starting  
Prairie Care!***

***Founders Community Center  
140 Oak Street  
Frankfort, IL 60423  
Phone # 815-469-9400  
Fax # 815-469-9275***