



KUDOS FOR KIDS
Point Arena Schools District
After School Enrichment Program
2023-2024



REGISTRATION INTAKE FORM

Student Information

Student Name:

Date :

Date of Birth:

Gender: Female Male Nonbinary

Ethnicity:

Programs:

Eligibility for Free/Reduced Meals: YES NO

English Language Learner: YES NO

McKinney Vento Homeless: YES NO

Foster Youth: YES NO

Grade:

Homeroom Teacher:

Home Phone:

Email:

Primary Language(s) spoken at Home:

Does your child have any MEDICAL ALERTS? If YES, please explain:

Parent/Guardian Information

Mother/Guardian Name

Home Phone:

Work Phone:

Cell/Pager:

Email:

Mailing
Address

Street or PO BOX:

City:

State:

Zip Code:

Physical
Address

Street Address:

City:

State:

Zip Code:

Father/Guardian Name

Home Phone:

Work Phone:

Cell/Pager:

Email:

Mailing
Address

Street or PO Box:

City:

State:

Zip Code:

Physical
Address

Street Address:

City:

State:

Zip Code:

Please circle the best way to contact above.

Emergency Contact:

How will your child get home from the program? 3:15 Bus

If bus, list afternoon bus stop: _____

Walk Other (describe) _____

Will be picked up by (names of authorized persons) _____

Signature of Parent/Guardian

Date