Anishinaabe [anguage Revitalization Department
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Sasiwaans Immersion School



Current Student Registration Form

2018 Summer Session

Student Information Form

School Year: 201	B-Summer Session June 18-28; July 9	0-19; July 30-Aug.2 Date:		
Student Name:		Birthdate:	Age:	
Student Address:	Number/Street Name	City	State	Zip
Phone: (XXX) XXX-X	XXX	Primary Instru	ctor:	

EMERGENCY CONTACT: In case of an accident or serious illness, I request the school to contact me. If the school is unable to reach me, I hereby authorize the school to contact either emergency contact listed below. If it is impossible to contact these sources; Sasiwaans will contact appropriate Tribal or non-Tribal authorities.

Emergency Contact #1	Emergency Contact #2
Name:	Name:
Llama Dhanai	Llama Dhanai
Home Phone:	Home Phone:
Cell Phone:	Cell Phone:
Work Phone:	Work Phone:

ADULT RELEASE: Children will be released to Parents/Guardians (following court order as applicable); Adults residing in the home and individuals listed as Emergency Contacts. Please list <u>any other adults</u> your child can be released to. Children will <u>NOT</u> be released to any other individuals other than those listed.

(1) Name:	(2) Name:
Relationship to Child:	Relationship to Child:
Cell Phone:	Cell Phone:
(3) Name:	(4) Name:
Relationship to Child:	Relationship to Child:
Cell Phone:	Cell Phone:

Parent/Guardian Signature

Date

By signing I understand that the Summer Session is an extension of the 2017-18 school year and all rules, regulations, and policy acknowledged by me for the regular school year are applicable to the summer session

OFFICE USE ONLY				
Date Received:	Received By:	Date Paid:	Receipt:	