

**The Elizabeth Ann Clune Montessori School of Ithaca
Student Information and Release Form 2017-2018**

Student Last Name	First Name	Middle Name	Birthdate
Student Last Name	First Name	Middle Name	Birthdate
Student Last Name	First Name	Middle Name	Birthdate

HOUSEHOLD 1	HOUSEHOLD 2 (IF APPLICABLE)
Address	Address
Parent/Guardian 1	Parent/Guardian 1
Name	Name
Relationship	Relationship
Cell/Mobile Phone	Cell/Mobile Phone
Work Phone	Work Phone
Home/Land line Phone	Home/Land line Phone
Email	Email
Include info in our Community Roster? Yes No	Include info in our Community Roster? Yes No
Parent/Guardian 2	Parent/Guardian 2
Name	Name
Relationship	Relationship
Cell/Mobile Phone	Cell/Mobile Phone
Work Phone	Work Phone
Home/Land line Phone	Home/Land line Phone
Email	Email
Include info in our Community Roster? Yes No	Include info in our Community Roster? Yes No

EMERGENCY CONTACTS: I/we understand that in the event of illness or unanticipated school closure, EAC Montessori will attempt to contact me/us. If the school is unable to reach me/us, the school should contact the individuals below. These individuals have my/our permission to pick up my/our child(ren) from school.

Name _____ Relationship _____ Phone _____

Name _____ Relationship _____ Phone _____

Name _____ Relationship _____ Phone _____

MEDICAL RELEASE: I/we understand that in the event of illness or injury, EAC Montessori will attempt to contact me/us. If emergency treatment is necessary, my/our child will be transported to Cayuga Medical Center's Emergency Room. I/we give permission for the attending physician to give emergency treatment, including but not limited to anesthesia, injections, and x-rays if necessary.

Physician's Name _____ Phone _____

Parent/Guardian Signature _____ **DATE** _____

Parent/Guardian Signature _____ **DATE** _____

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PHOTOGRAPH & VIDEO RELEASE

I/we give permission for EAC Montessori to use photos and/or video taken of my/our child(ren) in:

- Yes No** EAC Montessori Electronic publications (including our weekly newsletter)
Yes No EAC Montessori Printed publications (including our school yearbook)

FIELD-TRIP RELEASE

- Yes No** I/we give permission for my/our child(ren) to accompany their class on field trips
Yes No I/we give permission for any EAC parent or their designated driver to transport my/our child for class trips

TRANSPORTATION RELEASE

On occasion a student may need to be transported from school by someone other than a parent or guardian. Please contact the office to add or remove individuals. I/we give permission for the following persons to transport my/our child from school:

Name _____ Relationship _____ Phone _____
Name _____ Relationship _____ Phone _____
Name _____ Relationship _____ Phone _____
Name _____ Relationship _____ Phone _____

DAILY DISMISSAL PLANS

Keeping our students safe is critical! As families have become busier, we've found that the traditional phone/note system of communicating end of day dismissal plans can lead to confusion and errors. In order to improve our daily dismissal process in 2017-2018, EAC Montessori will begin using PickUp Patrol™. Be on the lookout for a "Welcome to PickUp Patrol™" email with login instructions and information on how to tell us your default dismissal plans for the end of the day.

Any dismissal changes after 2:15 p.m. on the day must be made by phoning the school office (607.277.7335).

School district buses generally arrive at EAC Montessori at 3:05 p.m. and depart by 3:20 p.m. from the Andrea B. Riddle Center parking area. Students who wish to use school district transportation must register with their local school district transportation department.

Individuals picking up Primary and Junior level children do so between 3:00 and 3:30 p.m. at the main school entrance. Middle School students can be picked up between 3:10 p.m. and 3:30 p.m. from the main entrance. Upper Level students are dismissed from the Upper Level Annex building between 3:00 and 3:30.

EAC Montessori offers an After School childcare program from 3:30 until 5:30 p.m. Monday through Friday on days that school is in session. Our **After School program will be CLOSED on 10/3/17, 1/30/18, and 4/3/18** due to staff training. **Pre-registration is required for regular attendance** in our After School program. Children who are not picked up by 3:45 p.m. will be sent to our After School program and a \$22 daily/drop-in fee will be charged.

School District _____ **Bus Route # (if known)** _____

Busing information can be found from your local school district Transportation Department.

Parent/Guardian Signature _____ **DATE** _____

Parent/Guardian Signature _____ **DATE** _____