
Forest Ranch Explorers Club

FRCS After School Program

PO Box 5, Forest Ranch, Ca 95942

• Phone: (530) 891-3005 • FAX: (530) 891-3155

www.forestranchcharter.org



REGISTRATION FORM

Complete and return this form to the Forest Ranch Charter School (FRCS) office. A registration form must be completed for each child who plans to enroll in the Forest Ranch Explorers Club for drop-in and/or monthly care. Students will not be allowed to attend the Forest Ranch Explorers Club without a completed registration form on file. The FRCS After School Program is *only available to students currently enrolled in FRCS*.

Child's Name _____ DOB ____/____/____
Child's Name _____ DOB ____/____/____
Child's Name _____ DOB ____/____/____
Parent/Guardian Name _____ Relationship _____
Home Phone Number _____ Cell Phone Number _____
Work Phone _____ E-mail _____
Address _____
Mailing Address _____

Others Authorized to pick-up/drop-off:

Name _____ Relationship to child _____
Name _____ Relationship to child _____
Name _____ Relationship to child _____

Emergency Contact Info:

Name _____
Phone Number _____ Relationship to child _____
Name _____
Phone Number _____ Relationship to child _____

In case of an emergency, I authorize the FRCS After School Program to use the information from the Emergency Contact sheet on file at the school to treat my child, _____ . *A copy will be kept with this registration form in the office.*

Parent/Guardian signature _____

Important notes from parent(s) to staff (*ie: allergies, health conditions, medications, etc.*):

Parent/Guardian Signature: _____ **Date:** _____