



## Registration Form

Name of Child \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ Age \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone number (\_\_\_\_) \_\_\_\_\_

Known allergies (including food) \_\_\_\_\_

Special needs \_\_\_\_\_

What else would you like us to know about your child?

**Emergency Contact Person:**

Parent/Guardian name \_\_\_\_\_

Address (if different from child) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone (Home) (\_\_\_\_) \_\_\_\_\_

Cell Phone or pager number (\_\_\_\_) \_\_\_\_\_

Phone number (work) (\_\_\_\_) \_\_\_\_\_ e-mail \_\_\_\_\_

We sometimes ask parents and guardians to share a special skill or hobby during a brief "show and tell" time in the Surprise Station Discovery Center. Please help us by completing the following:

What are your hobbies?

What are job skills you might be able to demonstrate?