

# "CAMP 6" REGISTRATION FORM

Woodbury Middle School - 6<sup>th</sup> Grade Middle School Transition Program  
Current 5<sup>th</sup> Graders Only



## Student Information

Student's Legal Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Student's Current Elementary School: \_\_\_\_\_

Student's Assigned Middle School: **Woodbury Middle School**

Parent(s)/Guardian(s): \_\_\_\_\_

Home Phone Number(s): \_\_\_\_\_ Cell: \_\_\_\_\_

Work Phone Number(s): \_\_\_\_\_ Cell: \_\_\_\_\_

Home Address: \_\_\_\_\_

Parent Email Address: \_\_\_\_\_

## Emergency Contact

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Cell: \_\_\_\_\_

Allergies or Medical Conditions: \_\_\_\_\_

Is this student receiving special services? \_\_\_\_\_ yes \_\_\_\_\_ no

Will this student need specialized transportation to/from the program? \_\_\_\_\_ yes \_\_\_\_\_ no

Is there anything we should know about your child to help him/her gain the most from this orientation program? \_\_\_\_\_

*(\*Feel free to contact the Woodbury Middle School Office 651-425-4501 if you would like to speak to someone directly.)*

## Registration and Permission

I would like my child, \_\_\_\_\_  
*(Please print student's name here)*

to attend CAMP 6 on Tuesday, August 20<sup>th</sup>, and Wednesday August 21<sup>st</sup> from 8am-12pm. I am aware that the 6<sup>th</sup> Grade Parent Night will be held on the evening of August 20<sup>th</sup>, 2019 from 5:30 pm to 7:00 pm.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PLEASE RETURN THIS FORM TO YOUR CURRENT ELEMENTARY SCHOOL'S FRONT OFFICE  
or fax to Woodbury MS 651-425-4567**

*\*\*\*Elementary Office Coordinators please forward on to Woodbury Middle School\*\*\**