**6TH GRADE SUMMER BRIDGE ORIENTATION CAMP 2016**

**REGISTRATION FORM**

**Successful Transitioning to Chamblee Middle School**

**Wednesday, July 27, 2016**

**8:30 am – 12:30 pm**

**\*\*\*\*ALL Registration forms are due by June 30, 2016\*\*\*\***

***Please PRINT all information below***

**Student Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**City and ZIP CODE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Best Contact Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ D.O.B.:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent/Guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent cell #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Please circle your child’s current School Ashford Park, Huntley Hills, Montgomery, Private or new to area.

How many Parent(s) or Guardian(s) are planning on attending with your student? \_\_\_\_\_\_\_\_\_\_\_ Please do not bring siblings or small children due to the space restrictions in the classrooms.

Lunch can be purchased for $8.00 (cash only) and will be served at the conclusion of the orientation around 12 in our cafeteria. We do need a number ahead of time, additional lunches will not be available for purchase at lunch time.

How many lunches would you like to buy? \_\_\_\_\_\_\_\_\_

I hereby give permission to instructors of Chamblee Middle School to provide reasonable care to my child named above in the event of injury or illness during the CMS 6th grade orientation camp, “Summer Bridge” if I am not present. Such care may include, but it not limited to, first aid treatment, transport to a medical facility or summoning emergency assistance. For and in consideration of allowing my child to participate in the CMS 6th grade orientation camp, I, the undersigned parent or appointed guardian of the above child, do hereby agree to indemnify and hold harmless Chamblee Middle School and its instructors from any and all liability from the above named child’s activities of any nature with said organization.

**SIGNED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**IMPORTANT NOTE**

*Attending Summer Bridge does not guarantee enrollment at Chamblee Middle School (CMS). Students that attend CMS must meet the following requirements: 1) Present two documents as proof of residence (for a complete list of acceptable documents, please visit DeKalb County’s website); (2) Have a completed Georgia Immunization form 3231.*

**Please return this signed registration form to Chamblee Middle School, Counseling Office, 3610 Sexton Woods Drive, Atlanta, GA 30341 or FAX to 678-874-8210.**

**PUENTE DE VERANO 2016 PARA ORIENTACION DE 60**

**FORMA DE REGISTRACION**

**Exitosa Transición a Chamblee Middle School**

**Miercoles, 27 de Julio del 2016**

**8:30 am – 12:30 pm**

**\*\*\*\*todas las formas de registración deben entregarse antes de 30 de junio, 2016\*\*\*\***

***Por favor escriban su información***

**Nombre del estudiante:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Dirección : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Ciudad y código de ciudad:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Mejor número de contacto: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Fecha de nacimiento:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Nombre padre o guardian:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**# de Tel. del padre: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_# de tel. trabajo: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Favor de circular la escuela de donde viene Ashford Park, Huntley Hills, Montgomery, Privada o de otra área.

¿Cuantos padres o Guardianes están planeando asistir con su hijo? \_\_\_\_\_\_\_\_\_\_\_ Favor no traer los hermanos o niños pequeños porque el espacio es limitado en los salones de clases.

Almuerzo puede ser adquirido a $8.00 (solo efectivo) y será servido al final de la orientación como las 12 en la cafetería. Necesitamos saber el número de personas que asistirán, almuerzo adicionales no estarán disponible.

Cuantos almuerzo le gustaría comprar? \_\_\_\_\_\_\_\_\_

Yo doy permiso para instructores de la escuela secundaria Chamblee para proporcionar una atención razonable a mi hijo nombrado arriba en caso de lesión o enfermedad durante el campamento de orientación CMS 6th grado, "Puente de verano" si no estoy presente. Este tipo de atención puede incluir, pero no limitada a, tratamiento de primeros auxilios, transporte a un centro médico o convocar la ayuda de emergencia. Por y en consideración a lo que mi hijo participe en el campamento de orientación de CMS de 6o grado, y yo como padre o tutor designado del niño, acepto mantener fuera de responsabilidad Chamblee Middle School y a sus instructores de toda actividad con el niño mencionado anteriormente.

**firma: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ relación con el estudiante: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**NOTA IMPORTANTE**

*Asistir al Puente de verano no garantiza la inscripción a Chamblee Middle School (CMS). Estudiantes que asistan a CMS necesitan presentar: 1) Presentar dos pruebas de residencia (para la lista de documentos aceptables visite la página de internet de DeKalb County); (2) tener la forma de inmutación completa 3231.*

**Favor devolver esta forma firmada a la oficina de consejeria de Chamblee Middle School, 3610 Sexton Woods Drive, Atlanta, GA 30341 o FAX to 678-874-8210.**