

### P3- Purposed Prince and Princes- Creative and Performing Arts

#### Registration Form

Child's Last name: \_\_\_\_\_ Child's First name: \_\_\_\_\_

DOB: \_\_\_\_\_ Age: \_\_\_\_\_ Gender: Male Female

Parent name: \_\_\_\_\_ Contact #\_(\_\_\_\_)\_\_\_\_\_

Secondary contact #\_(\_\_\_\_)\_\_\_\_\_ Email: \_\_\_\_\_

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

List all persons authorized to drop off/pick up your child other than yourself:

1. \_\_\_\_\_

2. \_\_\_\_\_

List your child's favorite things, hobbies, and interests:

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List your child's dislikes and frustrations (include sensory stresses or triggers):

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Additional comments or special considerations:

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What you expectations for your child in this program?

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### P3- Confidential Medical Form

Medical diagnosis or condition: \_\_\_\_\_

Degree of severity of the disability: Mild   Moderate   Severe   Profound

Any special equipment: (include glasses, hearing aids, walker, wheelchair, etc.):

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Please list any known allergies: \_\_\_\_\_

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Does your child take any medications? Yes or No

If yes, are there any possible side effects of medication or medical restrictions for your child? Please explain.

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List any positions or levels of gross motor activity your child is unable to perform due to condition or surgery?

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Does your child have any verbal communication limitations? Yes or No

If yes, how best does your child communicate with others?

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