



Please pay online or make checks payable to Blanche Sprentz PTO

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Student Name:

Age:

Teacher:

Grade:

Parent Name:

Parent Phone#:

Parent Email:

PICK-UP INFO:

Adult pick-up? YES NO

Ok to Walk Home? YES NO

Student Care? YES NO

EMERGENCY CONTACTS:

Name:

Phone#:

Name:

Phone#:

Parent Signature:

Date: