



**YOUTH ARTS TECHNOLOGY PROGRAM**  
**Parent/Guardian & Sign-Out Information**  
**PLEASE PRINT**

Child's Name: \_\_\_\_\_

Parent/Guardian's Name: \_\_\_\_\_

Relationship to Child: \_\_\_\_\_

Cell/Home #: \_\_\_\_\_ Emergency # (required): \_\_\_\_\_

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

Which session and class time is your child attending (please check all that apply):

Dates	9:30-2:00 pm	9:30-11:30 am	12:00 noon-2:00 pm	2:30-4:30 pm
Session I July 6-16				
Session II July 20-30				

Please designate the child's dismissal arrangements:

☐ Wait in building to be  
signed out by pick-up person

☐ Sign out independently  
with a staff member

If someone else is picking up your child, please write down his/her name and date (a photo ID is required). In case of an emergency pick-up, please send a signed note with the child that day or fax to 914-606-7386.

Pick-up Person's name: \_\_\_\_\_

Relationship to Child: \_\_\_\_\_

Parent/Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Mandatory Forms must be submitted prior to the start of the Youth Arts Technology Program via email to [peekskill@sunywcc.edu](mailto:peekskill@sunywcc.edu) or fax us at 914-606-7386 as soon as possible. If your child is enrolled in both two-week sessions, only one set of forms is required.