

# AMPED

LIVE FULLY ALIVE!

**STUDENT'S NAME:** \_\_\_\_\_

**STREET ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **PROVINCE:** \_\_\_\_\_ **POSTAL CODE:** \_\_\_\_\_

**HOME PHONE:** \_\_\_\_\_

**PARENT/GUARDIAN NAME:** \_\_\_\_\_

**PARENT/GUARDIAN EMAIL:** \_\_\_\_\_

**EMERGENCY CONTACT NUMBER:** \_\_\_\_\_

**ALLERGIES OR SPECILA NEEDS:** \_\_\_\_\_

**GRADE COMPLETED:** \_\_\_\_\_