



Safety City School Program Registration

Please Email Registration Form to admin@gpsafecommunities.com
ONE Class per registration form, each Teacher must complete a form for their class

Date Submitted:	By:	
School Name:	Grade:	
Contact Name:	No. of Students:	
Phone:	Age Range of Students:	
Program you wish to attend:		
<input type="checkbox"/> Street Smarts With Machines, Mammals and Mud or Barnyards and Boots (Grade 2)	<input type="checkbox"/> Fire Safety & Emergency Safety (Grades 3 - 6)	<input type="checkbox"/> Barnyards and Boots Farm Safety (see brochure for topic details) (Grades K – 5)
Names of Chaperones (Minimum of 3 per class, not including teacher)		
1. _____ 2. _____ 3. _____ 4. _____		
Please Note: Siblings are NOT permitted in Safety City (see attached)		
Please Note any Medical Conditions/Concerns of Students Attending:		
Have <u>Your Students</u> Previously Visited Safety City; if so, which course did the take?		
I have read and understand the “Planning a Trip to Safety City guideline (see attached)		
Signature: _____ Date: _____		