



REED ACADEMY - 1 Winch Street, Framingham MA 01701

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Please complete the following application form and return it to Reed Academy. Application deadline for Reed Academy's summer session is June 7, 2019. In order for us to properly evaluate your child's individual needs, an I.E.P. is required. Please attach or send under separate cover, your child's most recent educational plan. No application will be considered without an I.E.P.

Child's Name: \_\_\_\_\_ Birth date: \_\_\_\_\_

Nickname if applicable: \_\_\_\_\_

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

Town/Zip: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Emergency Contact Person: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone Number: \_\_\_\_\_

School Name (attending now): \_\_\_\_\_

School Address: \_\_\_\_\_ Town/Zip: \_\_\_\_\_

School Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

Other Agency Involved (if applicable): \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Camp Tuition Will Be Paid By: \_\_\_\_\_

Bus Company (if private transportation is provided): \_\_\_\_\_

Bus Contact Person: \_\_\_\_\_ Bus Phone Number: \_\_\_\_\_

Briefly describe your child's presenting difficulties: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What are your goals for your child?

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

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

3. \_\_\_\_\_

I give my permission for my child to attend Reed Academy's summer program and participate in all activities, which may include activities off the camp premises. I also give permission for a staff member of Reed Academy to speak to my child's physician, (psycho-pharmacologist), psychiatrist, and/or psychologist) and also to meet with my child's caseworker, counselor, and/or CORE chairperson in order to gather information to formulate a therapeutic program for my child. I hereby release and hold harmless the program and its directors, officers, employees, agents, and representatives, from any and all damages, claims, injuries, and liabilities of whatever kind, including but not limited to claims for bodily injury and loss or damage to personal property, which may arise out of my child's attendance at camp and out of his participation in any activities while in attendance.

Signature of parent/guardian: \_\_\_\_\_ Date: \_\_\_\_\_