



**WATCH DOGS**  
**Registration Form for**  
**EMERALD PARK ELEMENTARY**



Name: \_\_\_\_\_

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

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

Zip: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Mobile: \_\_\_\_\_ Work: \_\_\_\_\_

Place of Employment: \_\_\_\_\_

Do they offer paid Community Service hours? YES or NO

Would your employer consider being a funding partner for the school or the WATCH D.O.G.S. Program? YES or NO

If yes, whom should the coordinator contact? \_\_\_\_\_

Student's Name(s): \_\_\_\_\_

Homeroom Teacher(s): \_\_\_\_\_

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

**Please return this form to one of the following locations:**

1. Mail to Emerald Park Elementary, 11800 SE 216th ST, Kent, WA 98031
2. Drop the form off at the office or with your student's teacher.

**If you have any questions please call: (253) 373-3850**