

***RICHARD CARROLL ELEMENTARY SCHOOL
GEMS APPLICATION***



Name (Please print) _____ **Grade** _____

First _____ Middle _____ Last _____

Birth Date _____ Age _____

Parents/Guardian:

First Name _____ Last Name _____

Relationship to Member _____

Home Address _____

Parent/Guardian Contact Number: () _____

Parent/Guardian Signature _____

If you are selected to become a member of the **“RCES GEMS”**, what can you contribute to the club’s growth and strength?

T-shirt size (Circle one) Small Medium Large X-Large 1X 2X 3X