



# WatchDOGS Registration Form for



## SHERWOOD FOREST ELEMENTARY

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

Email: \_\_\_\_\_  
(ONLY used to communicate WATCH D.O.G.S.® updates)

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

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

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

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. Scan and email to [SherwoodForestWatchDogs@gmail.com](mailto:SherwoodForestWatchDogs@gmail.com)
2. Drop the form off at the office or with your student's teacher.
3. If you have questions, please contact [SherwoodForestWatchDogs@gmail.com](mailto:SherwoodForestWatchDogs@gmail.com)