

# Enrollment Application Form



Today's date \_\_\_\_\_

How did you hear about us? \_\_\_\_\_

## Student Information:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Allergies: \_\_\_\_\_

## Schedule Request:

	Mon	Tues	Wed	Thurs	Fri
Half-day (8:30 am- 11:30am)					
Academic day (8:30 am - 3:30 pm)					
Extended Day (7:45 am- 5 pm)					

Scheduling notes:

**Parent information:**  mother  father  guardian

Name (last, first) \_\_\_\_\_

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

City, State, Zip \_\_\_\_\_

Email address \_\_\_\_\_

Phone \_\_\_\_\_  
Home cell

**Parent information:**  mother  father  guardian

Name (last, first) \_\_\_\_\_

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

City, State, Zip \_\_\_\_\_

Email address \_\_\_\_\_

Phone \_\_\_\_\_  
Home cell