



Registration

Date ____/____/____

Child's Information

First Name _____ MI. ____ Last Name _____

School: _____ Grade: ____ Date of Birth ____/____/____

Parent Information

MOTHER

First Name _____ MI. ____ Last Name _____

Street Address _____

City _____ State _____ Zip Code _____

Occupation: _____

Description: _____

Hobbies/Interest: _____

Date of Birth ____/____/____ Phone (____) ____ - ____

E-mail _____

FATHER

First Name _____ MI. ____ Last Name _____

Street Address _____

City _____ State _____ Zip Code _____

Occupation: _____

Description: _____

Hobbies/Interest: _____

Date of Birth ____/____/____ Phone (____) ____ - ____

E-mail _____

X _____ Your Signature

***ONLY COMPLETE THE HIGHLIGHTED ADDRESS SECTION IF PARENTS RESIDE IN SEPARATE HOUSEHOLDS.**