

APPLICATION FORM

Child's Full Name: _____ Name used: _____

Date of Birth: _____ Telephone: _____

Home Address: _____

Parents' Information: (give names you prefer to be called, for the class list)

	Name	Home Phone	Work Phone
Parent Info:	_____	_____	_____

Occupation:	_____	Email:	_____
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Business Address: _____

Parent Info:	_____	_____	_____
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Occupation:	_____	Email:	_____
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Business Address: _____

Child's previous school experience or group participation, if any:

Brothers and sisters (names and ages): _____

In what way did you hear about the school? _____

Please share any special wishes or concerns you have for your child that you would like considered immediately: _____

You are interested in volunteering in: ____ Take home materials to prepare ____ Minor repair work ____ Sewing ____ Substituting

Parent's signature and date