



Application Form 2020-21

Child Information

Child's Name	Last	First	Middle	Name Used (Nickname)	Birthdate
Street Address			City		Zip code

Parent/Guardian #1

Name	Home Phone #	Cell Phone #	
Street Address		City	Zip code
Email			
Work/Company Name		Work phone #	
Work Address		City	Zip code

Parent/Guardian #2

Name	Home Phone #	Cell Phone #	
Street Address		City	Zip code
Email			
Work/Company Name		Work phone #	
Work Address		City	Zip code

Tell us more about your child (school experience, skills, needs, interests)

How can we enrich and support the growth of your child?

Signature

Date