

CHILD ENROLLMENT FORM

STUDENT DATA

Child's Name _____ Phone _____
 Address _____ Date of Birth _____
 City, State, Zip _____
 Religion _____ Parish _____

PARENTS/GUARDIAN DATA

Father/Guardian _____ Marital Status _____

Employer name & address _____ Cell Phone _____
 _____ Work Phone _____

Address (if different from student) _____ Email _____

Mother/Guardian _____ Marital Status _____

Employer name & address _____ Cell Phone _____
 _____ Work Phone _____

Address (if different from student) _____ Email _____

Please mark which phone number should be used 1st, 2nd, 3rd to reach you while your child is in the program.

Cell ____ 1 ____ 2 ____ 3 Home ____ 1 ____ 2 ____ 3 Work ____ 1 ____ 2 ____ 3
 ____ Father ____ Mother ____ Father ____ Mother ____ Father ____ Mother

Please list two people to be contacted in the event of an emergency **if the parent cannot be contacted:**

Name	Name
Street Address	Street Address
City	City
State Zip code	State Zip code
Relationship to Child	Relationship to Child
Home Phone	Home Phone
Cell Phone	Cell Phone
Work Phone	Work Phone

Physician

Dentist

Name	Name
Street Address	Street Address
City, State, Zip Code	City, State, Zip Code
Phone	Phone

Annual Class Roster

Each year we prepare a roster for each group of children in our program. This roster will not be furnished to any persons other than parents of children enrolled in our program.

I authorize the following to be listed on the parent roster.

Child's name	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Parents/Guardians names	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Phone number	<input type="checkbox"/> Work <input type="checkbox"/> Cell <input type="checkbox"/> Home	<input type="checkbox"/> No
Email	<input type="checkbox"/> Yes <input type="checkbox"/> No	

_____ Date _____
Signature of parent, or guardian

Handbook Agreement

We, members of the _____ family, have received and read a copy of the _____ Handbook.

We accept responsibility for acceptance and adherence to the policies, guidelines, rules, and fee payment plan of our school.

Media Release

I **DO** **DO NOT** give my permission to have my child appear in any media coverage approved by the school. Examples include, but not limited to, brochures, posters, newspapers.

School Website Permission

I **DO** **DO NOT** give my permission to have my child appear in any pictures placed on the Facebook/internet website I understand that names are never listed.

Parent/Guardian

Print Name(s) _____
Signature(s) _____
Date: _____