



REGISTRATION FORM

(Circle school child attends)

Brentwood Ron Nunn Garin Krey Pioneer Marsh Creek Iron House

Child's Name _____ Gender _____ DOB _____ Gr. _____

_____ Gender _____ DOB _____ Gr. _____

_____ Gender _____ DOB _____ Gr. _____

Person Responsible for Tuition and Fee Payments _____

Address _____

Home Phone: _____ Work Phone: _____ Cell Phone _____

Email Address: _____ to be used for invoices/receipts

Date Enrolled _____

Times services are needed _____ to _____ to _____

Before/After _____ After Only _____ 3 Days _____ 2 Days _____

(please specify which days child attends on PT plan)

Ethnicity: Hispanic/Latino Non-Hispanic/Latino

Race: American Indian or Alaskan Native Asian Black/African American Hawaiian/Pacific Islander White

Director: Prorate amount when necessary _____ + any other appropriate fees

Registration fee of \$75/child must be attached