



Child Enrollment Form

Entrance Date: _____ Withdrawal Date: _____

Child's Name: _____ Sex: _____ Age: _____ Date of Birth: _____

Home Address(Street): _____

City: _____ State: _____ Zip: _____

Mother's Phone: _____ Father's Phone: _____

School: _____ Grade: _____ T Shirt _____

Father's Name: _____ Father's Email Address: _____

Father's Home Address (if different from child's) Street _____

City: _____ State: _____ Zip: _____

Father's Place Employment: _____ Work Phone: _____

Employer's Street Address: _____ City: _____ State: _____ Zip: _____

Mother's Name: _____ Mother's Email Address: _____

Mother's Home Address (if different from child's) Street: _____

City: _____ State: _____ Zip: _____

Mother's Place of Employment: _____ Work Phone: _____

Employer's Street Address: _____ City: _____ State: _____ Zip: _____

Child's Living Arrangements: (check one) Both Parents Mother Father Other

Child's Legal Guardian(s): (check one) Both Parents Mother Father Other

The child may be released to the person(s) signing this agreement or to the following:

*Name: _____ Address: _____

Telephone number: _____ Relationship to child: _____

Relationship to Parent(s) or Guardian: _____

Other Identifying information(if applicable): _____

*Name: _____ Address: _____

Telephone number: _____ Relationship to child: _____

Relationship to Parent(s) or Guardian: _____

Other Identifying information(if applicable): _____