

ENROLLMENT FORM - SPRING 2019

lease check one:Hermitage/GCCC Class	s- Tuesday Nights	Mercer/BHC Class- Wednesday Nights
Youth Name:		Age (must be 10-14):
Parent/Caregiver Name:		Relationship to Youth:
Other Parent Caregiver attending:		Relationship to Youth:
Parent/Caregiver Mailing Address: _		
Parent/Caregiver Phone #:		
Sibling (that is age 10-14) attending:	Age	_ Relationship to Youth:
Sibling (that is age 10-14) attending:	Age	_ Relationship to Youth:
Sibling (that is age 10-14) attending:	Age	_ Relationship to Youth:
Childcare Needs: Please list those un	der age 10 who will	attend childcare classroom:
Name: Age		
Name: Age		
Name: Age		
Enrolling/Referring Agent, if applicate	ole, OR check "self":	Self: (please check)
Organization:		Staff Name:
Phone #:	Email address:	
School District Youth attends:		Grade Level:
Classroom Accommodations Needed:		
Medical Concerns:		
Behavioral Concerns:		

Food Allergies: ___