



ENROLLMENT FORM - SPRING 2018

Please check one: Hermitage/CCC Class- 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 under age 10 who will attend childcare classroom:

Name: _____ Age _____

Name: _____ Age _____

Name: _____ Age _____

Enrolling/Referring Agent, if applicable, 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: _____