

Registration Form

STUDENT INFORMATION			
Child 1 Name (<i>Last, First, M.I.</i>):		Sex: M F	
DOB:		Age:	Grade:
Which program(s) are you enrolling your child in:		Additional Information:	
GMPT Prep Homeschool Classes (in-person) GMPT Prep Homeschool Classes (online) The After-School Program for Young Entrepreneurs			
Child 2 Name (<i>Last, First, M.I.</i>):		Sex: M F	
DOB:		Age:	Grade:
Which program(s) are you enrolling your child in:		Additional Information:	
GMPT Prep Homeschool Classes (in-person) GMPT Prep Homeschool Classes (online) The After-School Program for Young Entrepreneurs			
Child 3 Name (<i>Last, First, M.I.</i>):		Sex: M F	
DOB:		Age:	Grade:
Which program(s) are you enrolling your child in:		Additional Information:	
GMPT Prep Homeschool Classes (in-person) GMPT Prep Homeschool Classes (online) The After-School Program for Young Entrepreneurs			

PARENT/GUARDIAN CONTACT INFORMATION			
Primary Parent/Guardian Contact Information			
Name:		Relationship:	
Address:			
City, State, Zip:			
Home/Cell Phone:		Work Phone:	
E-mail address:			
Employer (name and address):			
Secondary Parent/Guardian Contact Information			
Name:		Relationship:	
Address:			
City, State, Zip:			
Home/Cell Phone:		Work Phone:	
E-mail address:			
Employer (name and address):			

ADDITIONAL CONTACT INFORMATION

Additional Contacts A copy of a current government issued photo ID will be placed on file for everyone listed below.

Emergency Contacts (other than parent/guardian if there are not two listed above)

Name & Relationship	Address/City/State/Zip	Telephone Number

Drop-off/Release Contacts *****IN-PERSON STUDENTS ONLY*****

Name & Relationship	Address/City/State/Zip	Telephone number
	Check if this person is also an emergency contact.	
	Check if this person is also an emergency contact.	

By signing and submitting this application, I hereby and confirm that the information contained in this application is true and correct.

Parent/Guardian's Signature

Date

Administrator's Signature

Date