



# New Student Enrollment Form

<b>Student Information</b>	Date: _____
Student's Name: _____	
DOB: _____	
Street Address: _____	
City: _____	State: _____ Zip: _____
Phone (hm): _____	Phone (cell): _____
Student E-mail: _____	

<b>Parent/Guardian Information</b>
Parent/Guardian Name: _____
Street Address: _____
City: _____ State: _____ Zip: _____
Phone (hm): _____ Phone (cell): _____
Phone (wk): _____
Parent/Guardian E-mail: _____

Classes enrolled in: _____
_____
_____
<input type="checkbox"/> Enrollment Fee Paid