

LEGACY HOMESCHOOL ENRICHMENT SUMMER PROGRAM 2021

Child's Name _____ D.O.B. _____

Current grade _____

Address _____

City _____ Zip _____ Male/Female _____

Health Restrictions: _____

Foods allergies: _____

Special Needs (such as physical, emotional, or delayed development):

Previous School Background (Homeschool, public school (grades attended))

Reasons for choosing Legacy Summer Program:

Church Affiliation _____

Member? Yes or No

Mother's Name _____

Cell# _____ Email _____

Father's Name _____

Cell# _____ Email _____

Guardian's Name _____

Cell# _____ Email _____

Person other than parent/guardian to be contacted in case of illness or emergency:

Name _____ Phone # _____

Relationship _____

Name _____ Phone # _____

Relationship _____

LEGACY HOMESCHOOL ENRICHMENT SUMMER PROGRAM 2021

In order to provide the safest environment possible for your child, we ask that you list anyone other than those persons listed above to whom we may release your child.

Name _____

Relationship to student _____

Name _____

Relationship to student _____

Getting acquainted with your Family: List other siblings in the family:

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Are there any changes in your child's life we should be aware of? _____

Registration fee for current students-----\$0

Registration fee for new students-----\$75

Please make all checks payable to Church on the Rock – ITEMIZED “LEGACY”

Enrollment is based on the availability of class.

The handbook includes valuable information and forms that will need to be completed and returned with this registration packet.

Parent Signature: _____ Date: _____

{Office Use}

Class: _____ Non-refundable Deposit \$75 _____

1st Month Tuition : _____

Director Signature _____ Date _____