

Education | Tutoring | Homework Help | Arts & Culture | Mentoring Sports & Recreation | Health & Nutrition | Field Trips | Transportation

## 2017-2018 Inspiring Minds After-School Enrichment Program Application

Thank you for your application to the 2017-2018 Inspiring Minds After-School Enrichment Program. By returning this form, you and your child agree to their participation. Remember, **SPOTS ARE LIMITED.** If your application is accepted, you will be contacted to attend a mandatory parent meeting to finalize your enrollment in the program. If you do not attend the mandatory parent meeting, your application will be declined. **Please complete all parts of this document.** 

Student Name:				
Parent/Guardian Name:				
School:	(Circle one)	Walk to school	Parent drop off	Bus rider
Birth Date:	Gender:		Grade entered	in Fall 2017:
Address:				
City, State:		Zip Code:	_	
Cell #:	Home #:		Work #:	
Email:			_	
QUESTIONNAIRE:				
Did you complete other applications fo	r siblings? Yes	s No		
If yes, please list their first and last nam				<u>-</u>
What is your child's T-shirt size? (Circle	one) Youth S	Youth M Youtl	hL S M	L XL XXL
SUBMISSION REQUIREMENTS:				
1. TURN IN YOUR APPLICATION TO				
<ul><li>2. You will be contacted if your applica</li><li>3. There will be two additional mandat</li></ul>		·		andatory parent meeting.
4. Upon acceptance all students will be	, .	, , , ,		enrichment activities
5. A strict Behavior Policy will be enforce		•		
6. Program will be held at Lincoln & McC				
Parent Signature:			 Date:	
raient signature:		ı	Date:	