

STUDENT REGISTRATION FORM 2022-2023 SCHOOL YEAR

STUDENT INFORMATION

Name: _____

Address: _____

City: _____ *State:* _____ *ZIP:* _____

Home Tel: _____

Age: _____ *Birth date:* _____

School: _____ *Grade:* _____

PARENTS INFORMATION

MOTHER / GUARDIAN

Name: _____

Cell: _____ *Work Tel:* _____

E-mail: _____

FATHER / GUARDIAN

Name: _____

Cell: _____ *Work Tel:* _____

E-mail: _____