

WILDFLOWERS NATURE SCHOOL HOMESCHOOL PROGRAM APPLICATION FORM 2017-18

Session(s) applying for: Fall 2017 Spring 2018

Today's Date: _____ Number of children enrolling: _____

Full name of child 1: _____ Birthdate: _____ Gender: F M

Full name of child 2: _____ Birthdate: _____ Gender: F M

Full name of child 3: _____ Birthdate: _____ Gender: F M

Any nicknames? _____

Names & ages of other children in family: _____

Are kids signed up for one of the local homeschool programs? If so, which one? _____

Agreed upon tuition plan / rate: _____
(see program description for rates; don't hesitate to ask Bev if questions.)

Are you planning on carpooling? Yes No
Is it OK to give your contact info out to others for carpooling, play dates, etc? Yes No

Parent/Guardian Name: _____ Email Address: _____

Relationship (mother, father, stepmother, guardian, etc.) _____

Address: _____

Street Address
City
Zip

Mailing Address: _____

Address or P.O. Box
City
Zip

Phone: (home) _____ work: _____ cell: _____

Occupation: _____ Employer: _____

Place of Employment: _____

Street Address
City
Zip

Parent/Guardian Name: _____ Email Address: _____

Relationship (mother, father, stepmother, guardian, etc.) _____

Address: _____

Street Address
City
Zip

Phone: (home) _____ work: _____ cell: _____

Occupation: _____ Employer: _____

Place of Employment: _____

Street Address
City
Zip