



STUDENT REGISTRATION FORM

Student Name: _____

School Name: _____

(School in which the student attends or attended)

(PLEASE PRINT)

STUDENT INFORMATION:

Name: _____
(Legal Last) (Legal First) (Legal Middle)

Name: _____
(Preferred Last) (Preferred First) (Preferred Middle)

Date of Birth _____ / _____ / _____
y y y y m m d d Male Female

STUDENT CONTACT INFORMATION *(optional)*

Cell Phone _____ - _____ - _____ E-mail Address: _____

Note: Legal Name must be shown on legal document (i.e. birth certificate, passport, change of name order, adoption order, etc.) and will appear on all school Official Records

Number _____ Street _____ Apt. No. _____

Unit No. _____

Suite No. _____

City _____ State _____ Postal Code _____

HOME PHONE NUMBER: _____ :

MEDICAL INFORMATION

Medical Conditions:

If you have medical needs or conditions of which we should be aware, please describe the condition(s) below:

_____	Life Threatening
	Yes <input type="checkbox"/> No <input type="checkbox"/>
_____	Yes <input type="checkbox"/> No <input type="checkbox"/>

ACCOMODATIONS NEEDED

- 1) _____
- 2) _____

EMERGENCY CONTACT INFORMATION

1) Last Name _____ First Name _____

Male Female Relationship to student: _____

(Circle below, 1 = high, 4 = low)

For Emergency: Priority 1 2 3 4 For School Closure: Priority 1 2 3

4Home Phone ----- _____

Cell No. _____ - _____ - _____ Business No. ----- _____ ext. _____

2) Last Name _____ First Name _____

Male Female Relationship to student/comment: _____

(Circle below, 1 = high, 4 = low)

For Emergency: Priority 1 2 3 4 For School Closure: Priority 1 2 3

4Home Phone ----- _____

Cell No. _____ - _____ - _____ Business No. ----- _____ ext. _____

ADDITIONAL STUDENT INFORMATION: (_____

_____)

For Funding Purposes

A \$25.00 Non-refundable Fee will be required at the time of registration. If you are successful with any part of the bootcamp the fee will be applied to your tuition

All information provided above is correct and true. _____

Signature of Parent/Legal Guardian

Date: _____ / _____ / _____
y y y y m m d d