



Summit School Registration Form 2022-2023

Student Information:

First _____ Last _____ DOB _____
Nickname _____ Age _____ Gender _____

Parent/Guardian Information:

Name _____	Name _____
Address _____	Address _____
City, State, ZIP _____	City, State, ZIP _____
Home Phone _____	Home Phone _____
Cell Phone _____	Cell Phone _____
Work Phone _____	Work Phone _____
Occupation _____	Occupation _____
Employer _____	Employer _____
E-Mail Address _____	E-Mail Address _____

Indicate the Days Your Child will be Attending by circling the days:

Monday Tuesday Wednesday Thursday Friday

Approximate Daily Drop-Off Time _____
Approximate Daily Pick-Up Time _____

Background Information:

Names and ages of members members of the family:

Has your child attend school or daycare previously? If so, where and for how long?

How did you hear about Summit School?

For internal use	
Today's date: _____	Anticipated start date: _____
Anticipated contract: _____	
Deposit amount: _____	Deposit received: _____