

## **Enrollment Form**

Child's name:	Birthdate:	School:		Grade:
Student's cell phone (optional):	Student email address (optional):			
s, Next Gen staff members have permission to contact this student directly, solely for the purposes of sharing study materials or minders directly related to session scheduling and study planning.			Please initial:	
To enroll siblings:				
Child's name:	Birthdate:	School:	Grade:	
Student's cell phone (optional):	Student email address (optional):			
es, Next Gen staff members have permission to contact this student directly, solely for the purposes of sharing study materials or eminders directly related to session scheduling and study planning.			Please initial:	
To enroll siblings:				
Child's name:	Birthdate:	School:		Grade:
Student's cell phone (optional):	Student email address (optional):			
Yes, Next Gen staff members have permission to contact this student directly, solely for the purposes of sharing study materials or reminders directly related to session scheduling and study planning.			Please initial:	
Parent/guardian name:	Parent/guardian name:			
Cell phone:	Cell phone:			
Email address:	Email address:			
Home address:				
Home phone if any:				

## What do you want us to know about your child?

Brief notes are fine; we can always conference for more detail. Please consider academics, social life, interests and health if relevant to their time at Next Gen. Is there an IEP, 504 plan or any diagnosed special cognitive need or learning difference?