

# Affirm Program Enrollment Form

Name \_\_\_\_\_ Grade in Fall \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_

Parent's or Parents' Name (s):

Name \_\_\_\_\_ Cell \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_ Cell \_\_\_\_\_ Email \_\_\_\_\_

Child's Email Address \_\_\_\_\_ Child's Cell Phone \_\_\_\_\_

Allergies: (foods, medicines, latex, bees, etc.)

Activity Restrictions or Learning Requirements:

*If you have attended Affirm previously (Or even if you haven't):*

What was one thing you enjoy about Affirm?

If you could change one aspect of Affirm from the previous year(s) what would it be?

***There will be a small enrollment fee of \$25.00 per student this year.***

***Family Cap of \$75.00 – Sponsorships Available***