

Grace Church Homeschool Co-op 2011-2012
Registration Form for **Returning Students**

Parents' Names: _____

Phone: _____ Change of Address or email? _____ (if yes, please detail below)

	Student #1	Student #2	Student #3	Student #4
Name				
Age as of Oct. 1				
Class Title 1				
Class Time				
Tuition	\$	\$	\$	\$
Materials Fee	\$	\$	\$	\$
Check Amount	\$	\$	\$	\$
Check #	#	#	#	#
Class Title 2				
Class Time				
Tuition	\$	\$	\$	\$
Materials Fee	\$	\$	\$	\$
Check Amount	\$	\$	\$	\$
Check #	#	#	#	#
Class Title 3				
Class Time				
Tuition	\$	\$	\$	\$
Materials Fee	\$	\$	\$	\$
Check Amount	\$	\$	\$	\$
Check #	#	#	#	#
Class Title 4				
Class Time				
Tuition	\$	\$	\$	\$
Materials Fee	\$	\$	\$	\$
Check Amount	\$	\$	\$	\$
Check #	#	#	#	#

For Registrar Use (initials)	Service Hours	Teen Driver Form		
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