**Enrollment/Participation Form**

|  |  |
| --- | --- |
| Name:  Date of Birth:  Phone:  Email: | Date:  Address: |

|  |  |
| --- | --- |
| What programs would you like to participate in?  Tutoring  Library Services  Enrichment Classes  Recognition Days  Informational Classes  Student Leadership and Advisory Boards | Parent Advisory Board  Graduation Ceremonies  Arts and Crafts  Sporting Events  Fieldtrips and Live Events  Fundraising |

|  |  |
| --- | --- |
| Are you willing to volunteer time with us?  Yes  No | Is your family in the low income category?  Yes  No  If yes, please provide proof of public assistance |

**Student details:**

|  |  |
| --- | --- |
| Grade: | If you need tutoring, list the subjects: |
| School: |  |
| Father’s name: |  |
| Mother’s name: |  |
| Interests/talents: |  |
| Disabilities (if any): |  |

**Note:** All information will be shared only for internal use of New Heights Educational Group. Please visit [www.NewHeightsEducation.org](http://www.NewHeightsEducation.org) for more information.