



CHRISTIAN LEARNING CENTER

First Time Enrollment Form

Dear Parents,

This form is for any family planning to enroll with the Christian Learning Center for the first time. Please fill out the form below by listing the name(s) of your child(ren) who will be enrolling in the Center for the first time for the 2008-2009 academic year.

Please complete this form and return it to the CLC office by Friday, June 20, 2008.

Understand that your enrollment becomes official only after CLC receives and approves of your application.

CLC staff will review your form and then contact you to set up an appointment to discuss your child(ren)'s enrollment with the Christian Learning Center.

In Christ Jesus, our Lord,

Christian Learning Center.

Family Name: _____ Phone #: _____

Parents' Names _____

Name Of Child(ren)	Birthday (dd / mm / yr)
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_____	_____
_____	_____
_____	_____
_____	_____

Parent Signature: _____ Date: _____