



Registration Form
21st Century Community Learning Center
A partnership between Local School Districts and
Bureau Henry Stark Regional Office of Education
#28

Student Information:

Name _____
Grade _____ Date of Birth _____

Parent/Guardian Information:

Name _____
Address _____
Home Phone _____ Cell Phone _____
Best Time to Reach You _____ E-Mail _____

Which club will your child be participating in and which days will they be attending?

How will your child get home from the program?

Walk Parent pick-up Bus

Do we have your permission to transport your child for field trips or other program needs?

Yes No

Do we have your permission to use photos for publication purposes?

Yes No

Do we have permission to acquire academic records from the school?

Yes No

Please let us know if your child has any physical limitations and/or food allergies.

Signature of Parent or Guardian

Date

***This is not a drop in program. Regular weekly attendance is expected.*

Please complete form and return to:

Regional Office of Education
107 S State Street
Atkinson, Illinois 61235
309-936-7890