



PARTICIPANT REGISTRATION FORM 2017-2018

Enrollment Date: July 22, 2017

**There is a \$50 application fee due at the time of registration.*

(Fee Waiver available)

STUDENT INFORMATION:

First Name _____ **Middle Name** _____ **Last Name** _____

Address _____ **City** _____ **State** _____ **Zip** _____

Gender _____ **Birthdate** _____ **Age** _____ **Race** _____ **SSN (last four digits):** _____

School _____ **Grade** _____

Current ACT Score _____ **Month/Year Taken** _____

Have you been a participant in In Full Motion: No _____ Yes _____ **If yes, last attended (year)** _____

Extracurricular Activities/Sports and Athletics or Clubs (List) _____

PARENT /LEGAL GUARDIAN INFORMATION:

First Name _____ **Last Name** _____ **Relationship** _____

Home Phone _____ **Cell Phone** _____

Email address (parent) _____

Do you have other children in the program: No _____ Yes _____ **If yes, child(ren) name** _____

Does your child receive reduced or free school lunch: **No** _____ **Yes** _____

2016 Annual Household Income: **Below \$36,000** _____ **\$36,000 and above** _____

Parent's Signature _____

Date _____

DEADLINE FOR SUBMISSION OF APPLICATION: JULY 22, 2017

For more information, call (615) 254-6800 or email Cynthia.fitzgerald@comcast.net.