



Student Name _____ D.O.B. _____

Parent/Guardian _____ Cell Phone _____

Home Phone _____ Student Cell _____

Home Address _____

City _____ Zip Code _____

Parent Email Address _____

Student School _____ Grade _____

Is this school in CFISD? _____

Which subject(s) will your child be taking at Aspire? _____

Medical or other information we should know? _____

How did you hear about Aspire? Internet, Facebook, Yelp, Sign, Friend, Other

Student t-shirt size (circle one): YS YM YL S M L XL Date: _____

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For Office Use

Day(s) and time attending: _____ Subject(s): _____

Signed up for REMIND? _____ Notes: _____

Start Date: _____ Amount/Fees: _____