Transformation Afterschool Enrichment Program

Form of Intent

Please complete this form and return with your $50.00 administrative fee to reserve your child's spot.

Parent/Guardian Information

Name: _____

Address: _____

Home Phone: _____ Cell: _____ Work: _____

Email: _____

Student Information

Enter the Name of Each Child to Be Enrolled into the Program:

First and Last Name	Gender	Grade	School Attending
1.			
2.			
3.			
4.			
5.			
6.			

Will transportation be needed: (yes) / (no)

Parent Signature: _____ Date: _____

For more information contact Transformation Afterschool Enrichment Program: 6932 N Tryon Street Suite 1&2, Charlotte, NC 28213. 704-492-4506, 704-604-3107 & 704-526-0554
www.transformationes.org, transformationafterschool@gmail.com, help@transformationes.org