



## 2024-2025 Student Enrollment

Student name \_\_\_\_\_

\*Birthday \_\_\_\_\_ Age \_\_\_\_\_ Grade Entering \_\_\_\_\_ Gender \_\_\_\_\_

Parent(s)/guardian(s) name \_\_\_\_\_

Address \_\_\_\_\_

Contact names & numbers (please provide two):

\_\_\_\_\_  
\_\_\_\_\_

Email address \_\_\_\_\_

List any custody issues we may need to be aware of regarding your child: \_\_\_\_\_

\_\_\_\_\_

Has your child been dismissed from a school or tutorial? \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

Does your child have any allergies, special needs, or medical issues?

\_\_\_\_\_  
\_\_\_\_\_

\*Entering Kindergarten students must be five years old by August 15<sup>th</sup>.

### Please indicate the classes you would like to register for:

- Monday 9:00-1:00 – Elementary - \$115/month - Grade: \_\_\_\_\_
- Wednesday 9:00-1:00 – Elementary - \$115/month - Grade: \_\_\_\_\_
- Thursday 9:00-1:00 – Middle School - \$115/month – Grade: \_\_\_\_\_
- Friday (1<sup>st</sup> & 3<sup>rd</sup> of the month) 9:00-12:00 – High School - \$75/month – Grade: \_\_\_\_\_

Please complete back of form 

## Family Handbook Agreement

I have read the handbook for Elevate Enrichment Center and agree to its policies regarding behavior, health and safety, monthly tuition due dates (including late fees and the tuition security check), withdrawal procedures, and communication expectations (including signing up for the Remind text updates). I understand I can contact the director at any time with questions or concerns.

Parent Name \_\_\_\_\_

Student Name \_\_\_\_\_

Parent Signature \_\_\_\_\_

Date \_\_\_\_\_

Scan below to view handbook



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## Informed Consent and Acknowledgement

I hereby give my approval for my child's participation in any and all classes and activities prepared by Elevate Enrichment Center and its' teachers during the 2024-2025 school year. In exchange for the acceptance of said child's participation, I assume all risk and hazards incidental to the conduct of the activities while my child is in attendance, and release, absolve and hold harmless Elevate Enrichment Center, it's owner, teachers and all its' representatives from any and all liability for injuries to said child arising out of participating in sessions. In case of injury to said child, I hereby waive all claims against Elevate Enrichment Center, including all teachers, participants, owners and lessors of premises used to conduct the classes.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

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**Return completed form and a yearly registration fee of \$75 to secure your student's spot in one of our classes at Elevate Enrichment. Payment may be made by Venmo (@Elevate-Enrichment), cash or check. Contact us at ElevateEnrichmentTN@gmail.com or 615.308.8793 with any questions.**