



## 2009-2010 Rising STARS Registration

Today's Date: \_\_\_\_\_

Parent's Last Name: \_\_\_\_\_ Parent's First Names: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City Zip Code

Home Phone: (\_\_\_\_\_) \_\_\_\_\_ E-mail address: \_\_\_\_\_

Mom Cell Phone: (\_\_\_\_\_) \_\_\_\_\_ Dad Cell Phone: (\_\_\_\_\_) \_\_\_\_\_

### **CHILD #1**

Gender: M / F

Last name: \_\_\_\_\_ Date of birth: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

First name: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_ School: \_\_\_\_\_

Additional Information: \_\_\_\_\_

### **CHILD #2**

Gender: M / F

Last name: \_\_\_\_\_ Date of birth: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

First name: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_ School: \_\_\_\_\_

Additional Information: \_\_\_\_\_

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\_\_\_\_\_  
**Parent/Guardian signature, or person responsible for child**



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