

## Korean Language After School Program Registration Form

Thank you for your interest in A-KEEP's Korean language and culture after-school program. Please fill out this application form completely. Any student who has received disciplinary actions or suspended may not be able to attend the after-school program.

Please fill out this form to indicate your interest in participating in our Korean Language after-school program at your school.

### 1. STUDENT INFORMATION

Name: \_\_\_\_\_ (First, Last)

Permanent address: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: Primary (\_\_\_\_\_) \_\_\_\_\_ Secondary (\_\_\_\_\_) \_\_\_\_\_ Communication preference: ☐ Phone ☐ Email

Grade: \_\_\_\_\_ School attending next semester: \_\_\_\_\_

Have you received disciplinary actions or been suspended this school year? ☐ Yes ☐ No

If yes, please elaborate: \_\_\_\_\_

Gender: ☐ Male ☐ Female DOB (mm/dd/year) \_\_\_\_/\_\_\_\_/\_\_\_\_

Why are you interested in this program? \_\_\_\_\_

Korean Experience: ☐ None ☐ Beginner ☐ Intermediate ☐ Advanced

### 2. PARENT INFORMATION

Name: \_\_\_\_\_ (First, Last)

Permanent address: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: Primary (\_\_\_\_\_) \_\_\_\_\_ Secondary (\_\_\_\_\_) \_\_\_\_\_ Communication preference: ☐ Phone ☐ Email

### 3. EMERGENCY CONTACT INFORMATION

List two emergency contacts other than those listed above:

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Phone: Primary (\_\_\_\_\_) \_\_\_\_\_ Secondary (\_\_\_\_\_) \_\_\_\_\_

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Phone: Primary (\_\_\_\_\_) \_\_\_\_\_ Secondary (\_\_\_\_\_) \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_

Print Name \_\_\_\_\_ Date \_\_\_\_\_

**This application is not a confirmation of your enrollment in the program. Correspondence will be sent upon enrollment.  
Payment is not required until confirmation of enrollment**

For more information, please contact us at 334-300-6169

