

2025-2026 Registration Form

Student's	Name (Required)				
Date of B	irth (Required)				
Gender (Required)		Male	Female	Other	
Student's	Current Age (Required)				
Student's	Address (Required)				
City, State	e, Zip Code				
-	uardian Phone Number (Require				
	uardian Email Address (Required				
	26 Grade Level (Required): Kindergarten First Grade Second Grade Third Grade Fourth Grade Fifth Grade Sixth Grade Seventh Grade	reanMandarin	No Prefere	ence	
Does	the student have a currently en	rolled sibling? Yes	No		
If yes	s, please provide the currently er	nrolled student's name a	nd grade :		
Nam	e:	Grade:			
Is the	ere another sibling enrolling with	h this student? Yes	No		
If yes	s, please provide the name of the	e enrolling sibling and gra	ade:		
Nam	e:	Grade:			