

**Parent/Guardian Information**



Primary Family Email \_\_\_\_\_

Parent 1 Name (Primary Family Contact) \_\_\_\_\_

Parent 2 Name \_\_\_\_\_

Address \_\_\_\_\_

Home Phone (with area code) \_\_\_\_\_

Parent 1 Cell \_\_\_\_\_

Parent 2 Cell \_\_\_\_\_

**Emergency Contact Information**

*If parents cannot be reached...*

**First person to call** \_\_\_\_\_

Best Thursday Phone Number \_\_\_\_\_

Alternate Phone Number (if applicable) \_\_\_\_\_

Relationship to Student(s) \_\_\_\_\_

**2<sup>nd</sup> person to call** \_\_\_\_\_

Best Thursday Phone Number \_\_\_\_\_

Alternate Phone Number (if applicable) \_\_\_\_\_

Relationship to Student(s) \_\_\_\_\_

**3<sup>rd</sup> person to call** \_\_\_\_\_

Best Thursday Phone Number \_\_\_\_\_

Alternate Phone Number (if applicable) \_\_\_\_\_

Relationship to Student(s) \_\_\_\_\_

**Student Information**

How many students in your family would like to take classes at Harbor Homeschool? \_\_\_\_\_

**Student 1**

Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Grade 2017/2018 \_\_\_\_\_

Allergies \_\_\_\_\_

**Student 2**

Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Grade 2017/2018 \_\_\_\_\_

Allergies \_\_\_\_\_

**Student 3**

Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Grade 2017/2018 \_\_\_\_\_

Allergies \_\_\_\_\_

**Student 4**

Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Grade 2017/2018 \_\_\_\_\_

Allergies \_\_\_\_\_

Will you have additional children on site with you? (Not signed up for HHG classes?)

\_\_\_yes \_\_\_no

**Adult Background Information**

\*All adults connected to Harbor Homeschool Group who come on site regularly are required to have a background check through the State of Michigan ICHAT system.

The data below is required for ICHAT. We will contact you regarding ICHAT only if the background check results come back with any concerns.

**Adult Full Name**

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first	middle	last
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**Full Legal Maiden Name (if applicable)**

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**Nicknames**

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**Other Past Full Legal Names**

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Gender  male  female

Birthdate \_\_\_\_\_ Race \_\_\_\_\_

Please fill out one *Adult Background Information* sheet for each adult.

### **Liability Information, and Final Steps to Registration**

To finalize your family's enrollment with Harbor Homeschool Group, you will also need to complete the following steps:

- 1 Submit hard copies of adult liability, youth liability and medical release forms.
- 2 Attend a new family information meeting.
- 3 If you will also be new to Oxford Virtual Academy, they you will need to fill out OVA's online pre-enrollment form and turn in the required paperwork to the OVA registrar's office.

The information needed to complete the steps above is available on the website, but will be sent to you upon request.



**2801 S Telegraph**

**Dearborn, Mi. 2814**

**313-561-8774**

**[www.harborhomeschool.org](http://www.harborhomeschool.org)**

**Oxford Virtual Academy Worksheet**

***Oxford Virtual Academy or Self Pay***

\_\_\_\_ Yes – my family is already active with Oxford Virtual Academy.

\_\_\_\_ Yes – my family will be new to Oxford Virtual Academy for 2017/2018

\_\_\_\_ Yes – I would like to enroll with HHG on a 100% SELF PAY basis.

\_\_\_\_ No – please give me more information.

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Signature

Date

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*OFFICE USE BELOW THIS LINE*

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