

# DEUTSCHE SAMSTAGSSCHULE BRYAN

## Winter 2010 Application Form

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

### PARENT INFORMATION

Primary Parent Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_ Zip: \_\_\_\_\_ + \_\_\_\_\_

Phone: Home \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

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

Secondary Parent Contact Name: \_\_\_\_\_

Address: (If Different) \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_ Zip: \_\_\_\_\_ + \_\_\_\_\_

Phone: Home \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

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

### CHILD INFORMATION

Child's Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_ Age: \_\_\_\_\_

Pre-school/School: \_\_\_\_\_ Grade: \_\_\_\_\_ Gender: F / M

German Language Ability Comprehension: None\_\_ Beg\_\_ Int\_\_ Adv\_\_ Fluent\_\_

Speaking: None\_\_ Beg\_\_ Int\_\_ Adv\_\_ Fluent\_\_

Helpful information (allergies etc): \_\_\_\_\_

Other Interests/Hobbies: \_\_\_\_\_

### FAMILY INFORMATION

Language(s) spoken at home (in %): English: \_\_\_\_\_ German: \_\_\_\_\_ Other: \_\_\_\_\_

Main reason(s) for learning German: \_\_\_\_\_

Will someone be able to assist with German homework? Yes\_\_ No\_\_

Parents interested in volunteer work at school? Yes\_\_ No\_\_ Which Parent? \_\_\_\_\_

Would the parents like to receive the GTHS E-mail Newsletter? Yes\_\_ No\_\_

### EMERGENCY CONTACT INFORMATION (other than parent)

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

Physician: \_\_\_\_\_ Phone: \_\_\_\_\_

#### For Office Use Only (form revised 01/2010)

\$130/student for GTHS members; \$145 for non-members. Extra siblings cost \$115/each for members; \$130/each for non-members. Registration deadline is February 1st.

Beginner \_\_\_\_\_ Intermediate \_\_\_\_\_ Advanced \_\_\_\_\_

Application Rec'd: \_\_\_\_\_ Payment Deposited: \_\_\_\_\_ Amount Paid: \_\_\_\_\_ Check # \_\_\_\_\_