

NHD Registration Form

Student's Name _____ DOB _____

Teacher _____ Grade _____

Parent Email _____

Mother's Name _____

Cell Phone _____ Work Phone _____

Father's Name _____

Cell Phone _____ Work Phone _____

Club Fee \$195 per semester, please make check payable to Mrs. Trepanier

Names of Individuals who are authorized to pick up your child: (2 required)

Name: _____

Name: _____

Name: _____

Parent Name: _____ Parent Signature: _____

*Please note NHD club is for 5th and 6th grades only and there will be no younger siblings care during this time. Please make proper arrangements for Pre through 4th grade siblings.