

## Parent University Registration Form

August 29 to December 5, 2019 At Castleberry Elementary Every Thursday 5:30-6:45

## **Parent Information**

Parent First & Last Name			
Phone Number Address			
Which class will you be attended ☐ English ☐ Spani	•		
Please select the school(s) you	ır children atte	end:	
□ AV Cato Elementary			na Marsh Middle School
☐ Castleberry Elementary			stleberry High School
☐ Joy James Elementary		□ RE	EACH High School
Castleberry Elementary gym. Thi and activities during each class. <i>voluntary.</i>	vou attend Par hildren's progra s program is fa This is not a (	m every Thursday durir nith-based, will teach po Castleberry ISD progra	ng Parent University classes in the esitive lessons, and will have crafts am, and your participation is we a movie room for kids to watch
Please list the names and ages of classes. <b>Children must</b>			e while you are in Parent University
Child's Name	Age	Known Allergies	One Faith Church Program
			☐ Yes ☐ No
			☐ Yes ☐ No ☐ Yes ☐ No



If you plan to leave your child(ren) in Parent University childcare, and agree to these terms, please sign below: