



**Eagle Rock**  
**Multi-Age Program**  
 29300 NE 150<sup>th</sup>  
 Duvall, WA 98019  
 (425) 844-4900

For School Use Only	
Application Received	_____
Parent Visit	_____
Student Visit	_____
Info Night	_____

## Application for Enrollment

**PLEASE COMPLETE A SEPARATE APPLICATION FOR EACH CHILD**

- Please note that application for 2007-2008 school year must be received by March 2, 2007, to be included in the lottery process. Applications received after March 2<sup>nd</sup> will be considered on a space available basis.

Child's Name \_\_\_\_\_

Child's Address \_\_\_\_\_

Date of Birth \_\_\_\_\_  Male  Female

Grade Level Applying to Enter  K  1  2  3  4  5

\*Please note that ERMA Kindergarten is an all-day program and is tuition based (\$2500/year).

\*Contact the district office for the 2007-2008 tuition.

Current School/Preschool Attending \_\_\_\_\_ School Phone # \_\_\_\_\_

Current Grade Level & Teacher \_\_\_\_\_

Mother's Name \_\_\_\_\_ Father's Name \_\_\_\_\_

Address \_\_\_\_\_  
 \_\_\_\_\_

Home Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

Work Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Preferred E-mail \_\_\_\_\_ Preferred E-mail \_\_\_\_\_

Name/grade of siblings currently attending Eagle Rock Multi-age: \_\_\_\_\_

Signature(s) of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

\*\*\*\*\*

- Please return all forms completed by **March 2, 2007**
- Parents wishing to enroll their child(ren) **must** schedule their own **Classroom Visits** and **must** attend **Parent Info. Night** on March 8<sup>th</sup>.