

Omaha Homeschool Learning Center Registration

Parent's Name:		Phone:	
<input type="checkbox"/> No information has changed since my previous registration. I have reviewed all the information on the emergency and consent form and agree to all terms.			
<input type="checkbox"/> My child has an allergy that you need to be aware of. This information is included on the emergency form.			
Address:		Cell Phone:	
City, State, Zip		Email	

	Name: Birth date	Name: Birth date	Name: Birth date
1pm			
2pm			
3pm			
Other			

	Name: Birth date	Name: Birth date	Name: Birth date
1pm			
2pm			
3pm			
Other			

VOLUNTEERS: Teachers and volunteers receive priority registration, if forms are received before Dec. 31st. Those who volunteer may also apply for our scholarships.

Teacher's Assistant Housekeeping (before or after classes)

I'm available at 12:30 1 pm 2 pm 3 pm after classes

I can do work outside of Learning Center hours.

Total number of hours per day that you would like to volunteer: _____

I will have young children with me while volunteering.

Please include a non-refundable \$20 deposit for each class, which will be applied to the cost of the class. Checks may be made payable to OHLC. Mail completed form to **620 S. 67th St., Omaha, NE 68106**.
 Questions? Contact Jack Donnelly at omahahomeschool@gmail.com or 402-293-7621.

For office use only:

_____ Consent
 _____ Ck #
 _____ Amount
 _____ Recv'd