

Willow Bend Academy Registration Form

Non-Refundable Deposit Reserves AM/PM Seat

2220 Coit Road, Suite 500
 Plano, TX 75075
 Ph. 972-599-7882
 Fax 972-612-7858

Registration Date: ___/___/___
 Start Date: ___/___/___

Teacher: _____

On-Campus AM Session (August - May, 8:15 a.m. - 12:15 p.m.)
 On-Campus PM Session (August - May, 1:00 p.m. - 5:00 p.m.)
 Home Study (August - May)
 Single Semester Course (August - May) Semester A Semester B
Course Name: _____ **Transfer Credit to:** _____

Student Information

Name: _____ Student's E-mail: _____
(Last Name, First Name, M.I.)
 Address: _____ City: _____ State: _____ ZIP: _____
 Home Phone #: _____ Student's Cell #: _____ Ethnicity: _____
 Date of Birth: ___/___/___ Sex: F/M Student's Age ___ Grade to Enter: ___
 List all previous schools & city of location, starting with the most recent:

Does the student have a 504 accommodations plan? Yes/No. If yes, please provide a copy prior to the student beginning class.

Parent Information

Father's Name: _____ Living in home with student? Yes/No
 Address: _____ City: _____ State: _____ ZIP: _____
 Work Phone #: _____ Cell Phone #: _____
 Employer: _____ May we contact for tardy or absence? Yes/No.
 Dad's E-mail: _____

Mother's Name: _____ Living in home with student? Yes/No
 Address: _____ City: _____ State: _____ ZIP: _____
 Work Phone #: _____ Cell Phone #: _____
 Employer: _____ May we contact for tardy or absence? Yes/No.
 Mom's E-mail: _____

Primary Contact: _____ **Relationship:** _____ **Cell:** _____
 _____ How did you learn of WBA? _____

Signature

Date

FOR OFFICE USE	• Registration:	\$ _____	Date Paid: _____	Check # _____	Cash _____	CC _____
	• Curriculum:	\$ _____	Date Paid: _____	Check # _____	Cash _____	CC _____
	• Technology	\$ _____	Date Paid: _____	Check # _____	Cash _____	CC _____
	• Tuition:	\$ _____	Date Paid: _____	Check # _____	Cash _____	CC _____
	• _____	\$ _____	Date Paid: _____	Check # _____	Cash _____	CC _____
	• _____	\$ _____	Date Paid: _____	Check # _____	Cash _____	CC _____
	• Total Due	\$ _____	Payment Notes: _____			