



Brazos Valley Co-op Family Enrollment Application 2011-12

Family (Last) Name \_\_\_\_\_ Father: \_\_\_\_\_ Mother: \_\_\_\_\_

Do you have children who attended Brazos Valley Co-op last year (2010-11)? \_\_\_ Yes \_\_\_ No  
If not, who recommended you to BVC? \_\_\_\_\_

Are you the parent or legal guardian for all the children listed below? \_\_\_ Yes \_\_\_ No  
If no, please explain \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home Phone: (\_\_\_\_)\_\_\_\_ - \_\_\_\_\_ Other Phone: (\_\_\_\_)\_\_\_\_ - \_\_\_\_\_ Cell Phone 1: (\_\_\_\_)\_\_\_\_ - \_\_\_\_\_  
Cell Phone 2: (\_\_\_\_)\_\_\_\_ - \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

\_\_\_ Please check here if you would like to be added to the parent duty substitute list for co-op parents to call and possibly hire to serve their parent duty when necessary. Substitute fees are listed in the co-op handbook. (It is the substitute's responsibility to collect their fees.)

All applicants please list 3 family references below: Name, Phone Numbers and E-mail:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Is this your first year home schooling? \_\_\_ Yes \_\_\_ No

If yes, please list the school that each child previously attended below.

Child's name (first and last please), Child's Birthday and Previous School:

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Have any of the students listed above currently or previously been expelled from a school, been charged or convicted of a criminal offense, on probation, or have/had any other behavioral issues? \_\_\_ Yes \_\_\_ No

Medical issues and/or drug allergies that we might need to know in an emergency situation: Child's Name, Medical Issue(s) and/or Drug Allergies:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Family Doctor's Name: \_\_\_\_\_ Phone Number: (\_\_\_\_)\_\_\_\_ - \_\_\_\_\_

*I have read, understand, and agree to the policies contained within the Brazos Valley Co-op Handbook. I also understand that I am personally responsible to make sure my child understands and obeys these policies.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_