

Site Location: _____ Date: _____

Art Therapy Registration Form Creative Sparks **OR** 3.2.1 Art (Please Print)

Home Address: _____

City: _____ Zip Code: _____

Phone Number: _____ Email Address: _____

Number of Adults in Household: _____ Number of Children under 18 in Household: _____

Dominant Language Spoken at Home: English | Spanish | Other: _____

Signing up for: (Please check one)

- Creative Sparks
- 3-2-1 Art

	<u>Parent Name</u>	<u>Parent Name</u>	<u>Child 1</u>	<u>Child 2</u>	<u>Child 3</u>
First Name					
Last Name					
Gender	M F	M F	M F	M F	M F
Date of Birth (mm/dd/yyyy)					
Race	White Black/ African American American Indian Asian Native Hawaiian or Pacific Islander 2 or More Refused	White Black/ African American American Indian Asian Native Hawaiian or Pacific Islander 2 or More Refused	White Black/ African American American Indian Asian Native Hawaiian or Pacific Islander 2 or More Refused	White Black/ African American American Indian Asian Native Hawaiian or Pacific Islander 2 or More Refused	White Black/ African American American Indian Asian Native Hawaiian or Pacific Islander 2 or More Refused

Areas of Concern you would like Staff to know about? (Check all that apply)			Speech Behavioral Physical Separation Anxiety Special Needs Not Applicable Other (Specify)	Speech Behavioral Physical Separation Anxiety Special Needs Not Applicable Other (Specify)	Speech Behavioral Physical Separation Anxiety Special Needs Not Applicable Other (Specify)
Caregiver's Highest Level of Education	Some/ No High School HS Graduate/ GED Technical Certificate Some College Associate's Degree Bachelor's Degree Advanced Degree Refused	Some/ No High School HS Graduate/ GED Technical Certificate Some College Associate's Degree Bachelor's Degree Advanced Degree Refused			
Military (Active Duty or Retired)	Yes/ No	Yes/ No			
Relationship to Child	Parent Relative Friend or Neighbor Childcare Provider	Parent Relative Friend or Neighbor Childcare Provider			
Household Income	\$24,600 or Less \$24,601-37,250 \$37,251-59,600 \$59,601-74,500 \$74,501-89-400 \$89,401-104-300 \$104,301-149,999 \$150,000 or More Refused	\$24,600 or Less \$24,601-37,250 \$37,251-59,600 \$59,601-74,500 \$74,501-89-400 \$89,401-104-300 \$104,301-149,999 \$150,000 or More Refused			
Has your child attended other art programs like Center Place's Programs?	No/ Yes If yes, which ones?				
Why do you want your child to attend Center Place's programs?	(Mental Stress Relief, Counseling Recommendation, Skill Building, Other)				

Site Location: _____ Date: _____

Where did you hear about us?	
------------------------------	--