

Code B.L.U.E. Registration Form

Student Name:	Grade:		
School:	City:		
Home Address:	City:	Zip:	
Student Cell :			
Father's Name:	Father Cell:		
Mother's Name:	Mother Cell:		
Parent Email:			
FIRST NAME	LAST NAME		
In case of an emergency, p	lease list the numbers we should contact:		
1. Contact:	Phone:_		
2. Contact:	Phone:		
Medical Insurance	Policy: N	lo	
Student's Doctor:	Dentist:		

Lee Arthur Johnson Center (LAJC)

RULES TO FACILITATE LEARNING

- 1. Attend every Class.
- 2. Be respectful to others (students, teachers, assistants and guests)
- 3. Be responsible for your own behavior.
- 4. We are guests on this property. Keep restrooms, buildings, parking lot, and other areas clean.
- 5. Be prompt and maintain perfect attendance.
- 6. Take care of books, materials, and equipment.
- 7. Be attentive and a good listener and do not disturb others.

Students may be dismissed for non-compliance with any of the above rules. Students will not be given warnings for drugs, alcohol, smoking, weapons, or fighting.

Dismissal is automatic and immediate. There will be NO REFUND.

vill follow these and all other requ	(<i>print name</i>) have read and understand irements of the LAJC staff members.
(Student Signature)	(Date)
. I will follow these and all other r	(<i>print name</i>) have read and understand requirements of the LAJC staff members.
(Parent Signature)	