

# Reality Check Enrollment Form

Club Code: 500

Enrollment Type (Circle One):    N-New Enrollment    R-Re-Enrollment    D-Drop From Club

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ M.I. \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State NY Zip: \_\_\_\_\_

School: \_\_\_\_\_ Year in Reality Check: \_\_\_\_\_

Gender: Male / Female                      Birthday: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_                      Age: \_\_\_\_\_

Grade: \_\_\_\_\_                      Email: \_\_\_\_\_

Ethnic: (Circle One): White    African American    Hispanic    Mixed

Residence (Circle One): Farm    Rural Under 10,000    Town 10,000 - 50,000    City: Over 50,000

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Parent Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ M.I. \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State NY Zip: \_\_\_\_\_

Home Phone (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_                      Work Phone (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Occupation (optional): \_\_\_\_\_ Email: \_\_\_\_\_

Primary Parent: Y / N    Additional Parent: Y / N    Other    Legal Guardian: Y / N    Send Mailing: Y / N

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Parent Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ M.I. \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State NY Zip: \_\_\_\_\_

Home Phone (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_                      Work Phone (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Occupation (optional): \_\_\_\_\_ Email: \_\_\_\_\_

Primary Parent: Y / N    Additional Parent: Y / N    Other    Legal Guardian: Y / N    Send Mailing: Y / N

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I want the Extension Office to be aware of the following disability: \_\_\_\_\_

Y / N    Cornell University Cooperative Extension (Reality Check) is granted permission to use and/or publish my or my child's photograph or image (including audio, film, digital image or any other media) for educational programs, websites or promotion of Extension Programs.

Y / N    I do not want University Extension to reveal my name, address, or telephone number as part of a public record or list.

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

Parent/Guardian Signature: \_\_\_\_\_