



Maria Leticia Naranjo Arias
 2711 Ontario Road, NW
 Washington, DC 20009
 Phone (202) 232-2732

REGISTRATION FORM

Select the location your child will attend:

Adams Morgan
 2711 Ontario Rd. NW
 Washington DC 20009
 Email: davidstarsontario@gmail.com

Petworth
 4813 Georgia Ave. NW
 Washington DC 20011
 Email: davidstarsgeorgia@gmail.com

Child's full name:			
Date of Birth:		Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male	
Home address:			
Home phone:			
Language Spoken at home:			
Parent/guardian 1:	Name:		
Home phone:	Work:	Cell:	
Home address:			
Work address:			
Email address:			
Parent/guardian 2:	Name:		
Home phone:	Work:	Cell:	
Home address:			
Work address:			
Email address:			
Person to be contacted in case of an emergency (other than parent/guardian):			
Name:			
Home phone:	Work:	Cell:	

Home address:		
Work address:		
Designated individuals authorized to pick up the child other than the parents/guardians:		
Name:		
Home phone:	Work:	Cell:
Name:		
Home phone:	Work:	Cell:
Name:		
Home phone:	Work:	Cell:
Person registering the child:		
Signature:		
Relationship to the child:		
Date:		

THIS SPACE FOR DAVID'S STARS STAFF ONLY

Admission Date: _____

Program Withdraw Date: _____

Reason: _____

NOTICE: Child health/immunizations certificate must be attached to this registration form.