



MACH ACADEMY, INC.

Mentoring Academics Computers Healthy Recreation

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1850 Chester Avenue Augusta, Georgia 30906

(706) 796-5046

"TECHNOLOGY AND TENNIS FOR LIFE" ENROLLMENT APPLICATION

*= required fields

| | | | | |
|---|----------------------------|--|-------------------------|---------------------------------|
| Child 1 | | | | |
| Student's Name *: | Date of Birth *: | Age *: | Race *: | Gender *: M ___ F ___ |
| Name of School *: | | Grade *: | Name of Teacher: | |
| Special Medical Conditions: | | | USTA * # | |
| Child 2 | | | | |
| Student's Name *: | Date of Birth *: | Age *: | Race *: | Gender *: M ___ F ___ |
| Name of School *: | | Grade *: | Name of Teacher: | |
| Special Medical Conditions: | | | USTA * # | |
| Child 3 | | | | |
| Student's Name *: | Date of Birth *: | Age *: | Race *: | Gender *: M ___ F ___ |
| Name of School *: | | Grade *: | Name of Teacher: | |
| Special Medical Conditions: | | | USTA * # | |
| Parent/Guardian's Name *: | Home Tel. * () | Work Tel. () | E-Mail * | |
| Address *: | City *: | State *: | Zip Code *: | |
| Household Income: Annually *: \$ _____ | | | | |
| # of Children in Household | | Female Head of Household: Y ___ N ___ | | |
| Emergency Contact: Name *: | | Relationship: | Tel. # *: () | |
| How did you hear about us: | | | | |
| Previously Enrolled: Y ___ N ___ When /What Year? _____ | | | | |

⇐ PLEASE SIGN AND DATE ON BACK ⇒

Established in 1992 MACH Academy, Inc. is a 501(c) 3 non-profit prevention/intervention community-based organization. Programs and services are rooted in strong educational instruction, technology, healthy diets, fitness and recreational enhancements. This approach leads towards developing and advancing self confidence and effective problem solving skills. Programs include, but are not limited to the following:

Tutoring – Homework Assistance, Academic Support, Coding, and STEM; Career Exploration; College Planning; Tennis/Fitness Instruction; Healthy Eating; Leadership and Mentoring; Life Skills Development; Participation in local, state, and national academic, technology, and tennis competitions; Field Trips; Guest Speakers; Special Camps (Spring & Summer); and Year-round Community Outreach Opportunities.

Enrollment Conditions

1. *If requesting tuition assistance, a “Financial Assistance Request” and “Income Eligibility” form must be completed as part of this application. Documentation (i.e. W-2, income tax filing for previous year) verifying household income must be presented when the application is submitted.* _____
2. *Field trips are an important part of the program activities, and notification of trips will be given in advance. Through my signature, which appears on this document, I hereby give permission for my child to participate in all activities including field trips and fitness center activities. I will pay required fees upon notification of program fees, camps, trips, special events/projects, tennis tournaments, entry fees, etc.* _____
3. *Students are expected to follow the rules, regulations and guidelines of the organization. This information is posted at the facility and/or included in the “Program Participant’s Handbook”.* _____
4. *In the event of a medical emergency during an activity, I authorize permission for MACH Academy’s staff, to seek immediate medical attention for my child.* _____
6. *I give permission for photos and videos of my child as well as written documents compiled by my child to be used by MACH Academy, Inc. for the purposes of enhancing and expanding the program.* _____
7. *I understand that my child will have access to the Internet, which will provide extensive research tools and methods for global communications. I give permission for my child to utilize the Internet to support special research projects utilizing Internet guidelines as outlined by MACH Academy, Inc. These guidelines are posted at the center and/or included in the Program Participant’s Handbook.* _____

WE NEED YOUR SUPPORT

We need your help to continue our programs and better serve your child and the community. We fully understand that your time and financial resources are valuable and limited; however, we strongly believe that your effort will go towards the development and continuation of our programs and services. Please check and indicate your level of volunteer interest below.

Tutorial - Homework Assistance: _____

Beginner Tennis Coach: _____

Recreation Helper: _____

Parent Advisory Committee: _____

Office Helper: _____

Public Relations/Community Coordinator _____

Financial Sponsor: _____

Other (please specify) _____

Parent/Guardian Signature

Date