



New Family Application

Family Last Name:

Home Church:

Email Address:

Phone:

Help us get to know you. Tell us about your family and what you like to do together.

How did you hear about Next Gen? (If a friend referred you please include their name):

How long have you homeschooled?:

Next Gen is a parent participation program. Every parent agrees to play an active role while their child(ren) is/are in class. Which parent will be serving?

Please indicate any specific skills or strengths you have that would benefit our co-op families:

For the safety of our families, we believe it is important that anyone serving in a volunteer or teaching position will need to complete a background check prior to joining the Next Gen family. Are you willing to participate in a background check?

Please indicate children in your home who you would like to enroll in Next Gen for the 2024-2025 school year.

Name **Age** **Grade**

Name	Age	Grade

Please indicate the name and age of siblings who will require nursery care. Please note, only sibling(s) of school age students (age five by September 1, 2023) enrolled in co-op classes are eligible for nursery care.

Signature

Date