



Hope Academy

Registration Form

NAME

ADDRESS

TELEPHONE NUMBER

EMAIL ADDRESS

CHILD'S NAME

CHILD'S DATE OF BIRTH

There is a registration fee of \$75.00. Please provide a copy of your child's birth certificate along with a copy of their medical history records. For further information, please contact Valerie Haskins-Johnson at 571.351.7657.

The Hope Academy
9121 Piscataway Road, 4B
Clinton, MD 20735
www.hopelive.net

