



# 21st Century Community Learning Centers

Highland Middle School

2500 N. Jefferson

Principal: Michael Ryan (575) 433-1200

Site Coordinator: Jordan Varner

Home School \_\_\_\_\_ Grade \_\_\_\_\_

Home Room Teacher \_\_\_\_\_

Child's Name \_\_\_\_\_ DOB \_\_\_\_\_

Child's School ID Number \_\_\_\_\_

Primary Guardian's Name \_\_\_\_\_ Parent Contact Phone # \_\_\_\_\_

Address \_\_\_\_\_

Will your child be riding the bus?  Yes  No

Medical & Allergy Information \_\_\_\_\_

People allowed to pick up my child:

Name \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Ethnicity:  Hispanic  Black/African Am.  
 White  Native American  
 Other

Custody Information:

I have read and agree to all the information provided to me by the after-school staff: Print Name \_\_\_\_\_

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

School Principal \_\_\_\_\_ Site Coordinator \_\_\_\_\_

Return this form to the Home School Office for Review.

**Your child will not start the 21st CCLC Program until the 21st CCLC Site Coordinator contacts you.**