

Thank you for your interest in applying to Borson Academy to start this exceptional journey for your child. Please complete the Form below.

**Student Information**

First Name\_\_\_\_\_ Last Name\_\_\_\_\_

Gender\_\_\_\_\_ Allergies\_\_\_\_\_

Student Entering Grade\_\_\_\_\_ Current School District\_\_\_\_\_

Address\_\_\_\_\_ Street Address\_\_\_\_\_ City\_\_\_\_\_

State/Province/Region\_\_\_\_\_ ZIP/Postal Code\_\_\_\_\_

**Parent Information**

First Name\_\_\_\_\_ Last Name\_\_\_\_\_

Email\_\_\_\_\_ Phone\_\_\_\_\_

Address\_\_\_\_\_ Street Address\_\_\_\_\_ City\_\_\_\_\_

State/Province/Region\_\_\_\_\_ ZIP/Postal Code\_\_\_\_\_