



AVALON ACADEMY

"Educating the Whole Child"

1616 Indiana

Houston, Texas 7006

Pre-Registration Form

Today's Date: _____

Child's Name: _____

Child's Age (when starting): _____

Date of Birth: _____

Parent's Name: _____

Work Phone: _____

Parent's Name: _____

Work Phone: _____

Address: _____

E-Mail Address: _____

Date Child Will Start: _____

Starting Class: _____

Registration Fee Paid to Hold Spot: \$_____ Check No.: _____

NOTE: Registration fee is non-refundable.

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