



**Fall Sessions: Friday 4:00pm- 5:30pm**

**10 Weeks  
Career Development**

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## **H&L REGISTRATION FORM**

### **Participant Information:**

First and Last Name: \_\_\_\_\_

Age: \_\_\_\_\_ Grade: \_\_\_\_\_

### **Parent/Guardian Information:**

First and Last Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Middle/High School: \_\_\_\_\_