DISCOVERY LANGUAGE ACADEMY

STUDENT REGISTRATION FORM

Please complete all applicable sections. Office use sections should be completed by Discovery Language Academy.

Office Use Only		**Registration Number**	

1. Student Information

Student's Full Legal Name		**Date of Birth (MM/DD/YYYY)**	
Preferred Name		**Age**	
Complete Address		**City / State / ZIP**	
Place of Birth		**Nationality**	
Home Phone		**Cell Phone**	
Student Email		**School / Grade (if applicable)**	

2. Parent / Guardian Information (required for students under 18)

Parent / Guardian 1 — Full Name		**Relationship to Student**	
Phone		**Email**	
Parent / Guardian 2 — Full Name		**Relationship to Student**	
Phone		**Email**	

3. Emergency Contact

Emergency Contact Full Name		**Relationship**	
Primary Phone		**Alternate Phone**	

4. Program / Class Information

Program / Class Requested		**Level (if known)**	
Preferred Day / Time		**New or Returning Student**	☐New ☐Returning
How did you hear about Discovery Language Academy?		**Registration Notes**	

STUDENT LANGUAGE & LEARNING INFORMATION

This section helps us place students appropriately and support their learning.

5. Language Background

Primary Language Spoken at Home		**Other Languages Spoken**	
Student's First Language		**Years Studying This Language**	
Current Proficiency (if known)	☐Beginner ☐Intermediate ☐Advanced	**Previous School / Program**	

6. Additional Information

Please tell us anything that may help us better support the student's learning:

7. Acknowledgment & Signature

I certify that the information provided on this registration form is accurate to the best of my knowledge. I understand that Discovery Language Academy may use this information for student registration, placement, communication, and program administration. I agree to notify the school if any information changes.

Tuition Policy: Families are responsible for paying tuition in full for the school year, even if the student withdraws before the program ends, except in cases of documented emergency or extenuating circumstances (e.g., medical emergency, relocation), which will be reviewed by Discovery Language Academy on a case-by-case basis.

Student Signature (if age 18 or older)		**Date**	
Parent / Guardian Signature		**Date**	

8. Office Use Only

Placement / Level		**Staff Initials**	
Payment / Registration Status		**Date Processed**	
Additional Office Notes		**Student ID / Record #**	