

# STUDENT AFFILIATE REGISTRATION

Teacher \_\_\_\_\_

Association \_\_\_\_\_

Date \_\_\_\_\_

Count	Student Last Name	Student First Name	School Grade	Home Schooled	Exceptions
1					
2					
3					
4					
5					
6					
7					
8					
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11					
12					
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24					
25					
26					
27					
28					
29					
30					

Comments: \_\_\_\_\_

Total