

FEZ 2021-2022 - SURVEY / REGISTRATION FORM

Please take a minute to answer a few questions by putting **(X)** in the **(YES or NO)** box. When you are done, please send it to **Agape**. Just use your cellphone to “snapshot” this form and text it to **770-362-6596**. We thank you in advance for your time in completing this survey. We appreciate you!

		YES	NO
1	Parents, do you have knowledge of financial literacy?		
2	Are you interested in having your child taking a course in financial literacy?		
3	Would you like to see your child to be financially independent at age 21?		
4	Do you think it's your responsibility as a parent/guardian to prepare your child for financial independence?		
5	Do you anticipate your child being debt free as an adult?		
6	Do you have access to a desktop, laptop or tablet and internet connection at home?		
7	Do you have in writing long and short term goals for your child with a budget?		
8	Are you aware of the debt your child will inherit from the previous generations?		
9	On a scale of 1 to 10 (<i>10 being the highest</i>), how important is financial security for your child?		
10	Do you know the resources available to teach financial literacy?		

Parent/Guardian, based on your response, will you be committed to enroll your child in the FEZ program? Will you be committed to support your child and give minimum hours of your time to this program? If yes, please complete (**print**) your information below, sign your name, and **email it to our Administrative Office, Ann Pitts... j_pitts@bellsouth.net or call, text her at 770-362-6596.**

(Registration Form ✓)

Each Child Must Complete a Form

Child's Name: _____

Child's Date of Birth: _____

Parent/Guardian Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Child's Cell Phone: _____

Parent/Guardian Email Address: _____

Parent/Guardian Signature: _____