



CITIZENS ACADEMY OF BELLBROOK

ENROLLMENT APPLICATION

15 EAST FRANKLIN STREET, BELLBROOK, OHIO 45305
(937) 848-4666 WWW.CITYOFBELLBROOK.ORG

PERSONAL INFORMATION

LAST NAME _____ FIRST NAME _____
ADDRESS _____ ZIP CODE _____ PHONE (_____) _____ - _____
EMAIL _____ DATE OF BIRTH _____

BACKGROUND

LENGTH OF RESIDENCE IN BELLBROOK _____ CAN YOU COMMIT TO ATTEND ALL 8 WEEKLY SESSIONS? YES NO
(TUESDAYS 6:30-8:30 PM SEPTEMBER 5,12,19,26, OCTOBER 3,10,17, 23)

LIST YOUR PAST INVOLVEMENT IN BELLBROOK COMMUNITY ORGANIZATIONS, CLUBS, SPORTS, CIVIC ORGANIZATIONS, SCHOOLS, ETC

WHAT MADE YOU INTERESTED IN PARTICIPATING? _____

THE ACADEMY WILL INVOLVE PRACTICAL EXPERIENCES INCLUDING WALKING, ENTERING BUILDINGS AND VEHICLES, AND ACCESSING STEPS AND UNEVEN SURFACES. DO YOU NEED ANY ACCOMMODATIONS FOR PARTICIPATION? _____

ALL APPLICANTS ARE SUBJECT TO SCREENING TO ENSURE THE SAFETY OF ALL PARTICIPANTS. BY SUBMITTING THIS APPLICATION, YOU AGREE TO THE RULES OF PARTICIPATION.

SIGNATURE: _____

Submit completed form by emailing above
or to City of Bellbrook attn: Citizens Academy
15 E. Franklin Street Bellbrook, OH 45305