



INTENT TO RETURN

- I have completed my INTENT TO RETURN online
OR
 I intend to re-enroll my student with OLA for the 2019-2020 school year, and am providing updated contact information:

Please PRINT Current Primary Parent Contact Information

Student Full Name	
Student Date of Birth	
Parent Full Name	
Parent Email	
Parent Cell Number	
Parent Work Number	
Parent Home Number	
Physical Address	
City, Zip	
Mailing Address (if different than physical)	
City, Zip	
<i>Provide Secondary Parent Contact Information On Back</i>	

 Parent/Guardian's Signature

 Date



Secondary Parent Contact Information

Parent Full Name	
Parent Email	
Parent Cell Number	
Parent Work Number	
Parent Home Number	
Physical Address	
City, Zip	

By 5:00pm, March 29, 2019, please return this form to:

OLA
345 East Prospect Ave.
Monte Vista, CO 81144