



HORIZONS[®]

The Ethel Walker School

REGISTRATION GUIDE

2021



IMPORTANT

PLEASE READ BEFORE YOU CONTINUE

You will need the following items to complete registration:



An Email Account You Have Easy Access To.

You will need to receive and open the form through your email.



Health Insurance Card

Or other document that lists the following information:

- Healthcare Insurance Provider
- Insurance Policy Number
- Insurance Group Number
- Insurance Policyholder Name
- Insurance Policy Contact Number



Phone Numbers of TWO Emergency Contacts

The parents/guardians of the student you are registering cannot be used as emergency contacts.



OPTIONAL: Preferred Physician Contact Info

If you have a preferred physician, you will need the following information:

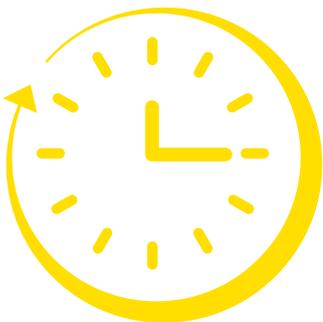
- Physician Name
- Physician Address



OPTIONAL: Allergy & Medication Information

If your child has allergies or is currently taking regular medication, you will need to provide the following information:

- Known allergies
- List of regular medications



Registration will take you approximately 20 minutes.

When you are ready, proceed to **STEP ONE**

STEP ONE:

CLICK HERE to sign up for an account.

https://horizons.force.com/yc_Community_Registration_Page

Important note for this page:



APPLICATION AND ENROLLMENT FORM

Fields marked with an * are required

**REMEMBER
THIS EMAIL**
You will need it
for STEP TWO.

Language/Lengua	<input type="text" value="English"/>
Parent/Guardian First Name*	<input type="text"/>
Parent/Guardian Last Name*	<input type="text"/>
Parent/Guardian Email*	<input type="text"/>
Confirm Email*	<input type="text"/>
Parent/Guardian Phone*	<input type="text"/>

Required format: (999) 999-9999 or +1 (999) 999-9999

**Make sure that you enter your phone
number in this EXACT format:**

(###) ###-####

Don't forget the dash

Fill out all fields on the page.

When you are finished, press

Register

Proceed to STEP TWO



STEP TWO:

Navigate to the email you used in **STEP ONE**.



Find the email from Horizons.

TIP: Check your Spam/Junk Folder if the email is not in your inbox.

Click on the link in the email and set up the password for your Horizons account.

Your password must

- be **AT LEAST 8** characters
- contain **1 letter**
- contain **1 number**

A screenshot of the Salesforce "Change Your Password" form. At the top is the Salesforce logo. Below it, the title "Change Your Password" is centered. The form asks to "Enter a new password for kirtland@cdshorizons.org." and lists requirements: "Make sure to include at least:" followed by three items: "8 characters", "1 letter", and "1 number", each with a green checkmark. There are two input fields: "New Password" and "Confirm New Password". The "New Password" field shows "Good" and the "Confirm New Password" field shows "Match". A blue "Change Password" button is at the bottom. A footer note says "Password was last changed on 2/26/2021 1:57 PM."

Once you have decided on a password, **WRITE IT DOWN.**

Then press

Change Password

Proceed to **STEP THREE**

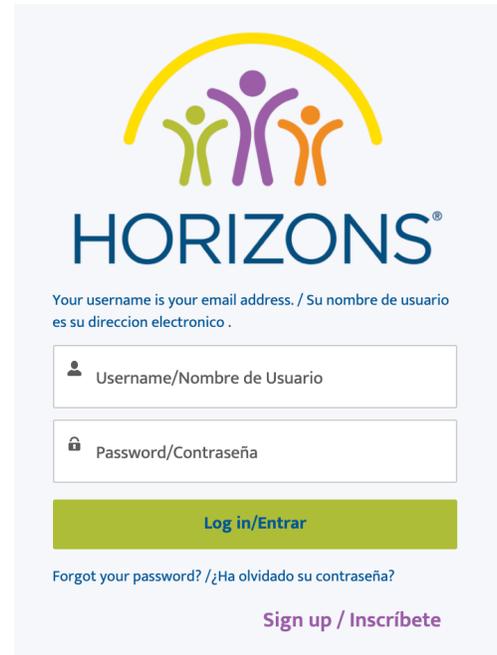


STEP THREE:

Login to the Horizons system.

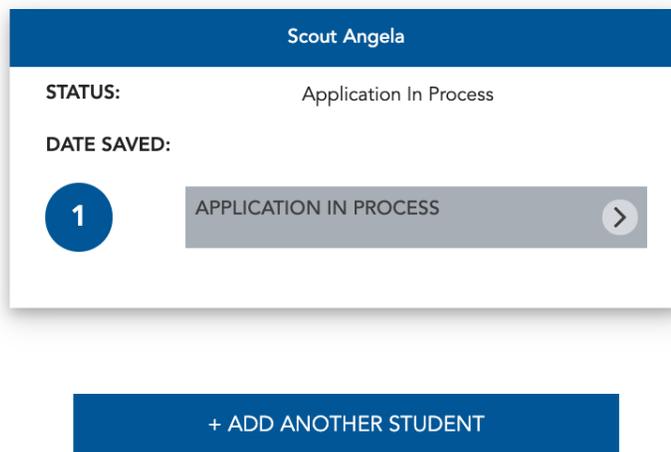
Your username is the Email Account from STEP ONE.

Your password is the password you created in STEP TWO.



Once you have logged in, you will see:

HORIZONS APPLICATION AND ENROLLMENT DASHBOARD



Press this arrow to get in to the application.

Proceed to STEP FOUR



STEP FOUR:

Fill out the application.

Every field marked with an * is **REQUIRED**.

At the end of each page, press

Save & Next

Documents Tab forms can be found at

<https://www.horizonsethelwalker.org/apply/returning-students/>

If you are not taken to the next page after pressing. "Save & Next," check for these common errors:

An error occurred while trying to update the record. Please try again.

- **Have you filled out every field with an *?**

* Current School ⓘ

Complete this field.

- **Have you formatted Phone Numbers correctly?**

* Guardian 1 Phone

1234567891

Please enter phone number as either as either (999) 999-9999 or +1 (999) 999-9999

**Phone Numbers must be in (123) 456-7891 format.
Don't forget the PARENTHESES and DASH.**

**You can use (000) 000-0000 if you
do not have a Phone Number on hand.**

Proceed to STEP FIVE



STEP FIVE:

Submit the application.

HORIZONS APPLICATION AND ENROLLMENT DASHBOARD



You have successfully completed registration when you see the above page.

THANK YOU!

If you have any questions or concerns after submitting your application, please email phyatt@my.ethelwalker.org or call (860) 408-4236



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