

# HERITAGE CHRISTIAN ACADEMY

## REGISTRATION FORM

### STUDENT INFORMATION

Student's Legal Name (Last, first, middle)			E-mail
Age	Sex	S.S.#	Home Phone ( )
Address		City	Zip
Birth Date	Birth Place		Grade Applied For:
School attended last year			
Who recommended you to Heritage Christian Academy?			

### PARENT OR GUARDIAN INFORMATION

Father's full name		E-mail		
S.S.#		Employer		
Employer's Address				
Home address (if other than above)				
Home Phone ( )		Work Phone ( )		
Mother's full name				
S.S.#		Employer		
Home Address (if other than above)				
Home Phone ( )		Work Phone ( )		
Parent's Marital Status (Please circle one)	Married	Widowed	Divorced	Separated
With whom does the child reside?	Both parents	Mother	Father	Guardian
Other children in family (names & ages)				
Do you have more than one child in our school?		YES		NO
If yes, how many?	List names & grades			

### IF APPLICABLE

Guardian's full name	
Home address (if other than above)	
Employer	Employer Address
Home Phone ( )	Employer's Phone ( )