

**OFFICE USE ONLY**  
Start Date: \_\_\_\_\_

**Calvary Christian School**  
**General Registration Form**

(Please Print)

**Child's Name:** \_\_\_\_\_  
(Last) (First) (Middle) (Name Preference/Goes By)

**Date of Birth:** \_\_\_\_\_ **Age of Child:** \_\_\_\_\_

**Previous School/Day Care Attended:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**School Year Enrolling:** \_\_\_\_\_

**Circle the grade/program your child is enrolling for:**  
Pre-K3 (circle one): 2-day 3-day 5-day 5-day w/ Extended Care included  
Pre-K4 (circle one): 5-day 5-day w/ Extended Care included  
Kindergarten 3<sup>rd</sup> Grade 6<sup>th</sup> Grade 9<sup>th</sup> Grade 12<sup>th</sup> Grade  
1<sup>st</sup> Grade 4<sup>th</sup> Grade 7<sup>th</sup> Grade 10<sup>th</sup> Grade  
2<sup>nd</sup> Grade 5<sup>th</sup> Grade 8<sup>th</sup> Grade 11<sup>th</sup> Grade

**Father/Guardian:** \_\_\_\_\_ **Home #:** \_\_\_\_\_ **Cell #:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Mailing Address:** Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Employer:** \_\_\_\_\_ **Work #:** \_\_\_\_\_

**Mother/Guardian:** \_\_\_\_\_ **Home #:** \_\_\_\_\_ **Cell#:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Mailing Address:** Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Employer:** \_\_\_\_\_ **Work #:** \_\_\_\_\_

**This child lives with (circle one):** both parents mother only father only other \_\_\_\_\_  
**If separated/divorced, who has primary custody? (circle one):** joint mother father other (explain below)  
\_\_\_\_\_ \*Legal documentation required if applicable.

**Please list other children in family:**  
1) \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_  
2) \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_  
3) \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_

**Family Physician Practice:** \_\_\_\_\_ **Dr. Name/Phone:** \_\_\_\_\_

**Is there any evidence of food or other allergy? (circle one):** Yes No  
If yes, explain: \_\_\_\_\_

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**Is the parent/guardian/financially responsible party an "active" Calvary Baptist Church member?**  
"Active" means that the church member is regularly attending and involved in the church. *Please Note: You do not have to be a church member to attend Calvary Christian School. This is simply to determine if you are eligible for the "Active" Church Member Discount. "Yes" answers must be approved by the Senior Pastor.*  
**Circle One: Yes No**

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**I agree that the school may authorize the physician of their choice to provide emergency care if neither I nor the family physician can be contacted immediately.**

**My child has my permission to participate in all field trips taken during the school year. I understand that I will be informed in advance of the field trips.**

\_\_\_\_\_  
(Parent/Guardian Signature)

\_\_\_\_\_  
(Date)