



DATE:

# RE- ENROLLMENT FORM

LEADING THE NEXT GENERATION TO HIGHER STANDARDS THROUGH CHRISTIAN EDUCATION

FOR OFFICE USE ONLY:

RE-ENROLLMENT FEE \$50 **NON-REFUNDABLE** (PER STUDENT)

STEP-UP FOR STUDENT  MCKAY  CASH  VISA/MC  CHECK# \_\_\_\_\_

For the School Year \_\_\_\_ - \_\_\_\_

Student's Name \_\_\_\_\_

Grade to Enter \_\_\_\_\_

Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Sex \_\_\_\_\_ SSN# \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Home Phone (\_\_\_\_) \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip Code \_\_\_\_\_

Father's Name \_\_\_\_\_

Mother's Name \_\_\_\_\_

Email Address \_\_\_\_\_

Email Address \_\_\_\_\_

Father's Employer \_\_\_\_\_

Mother's Employer \_\_\_\_\_

Work Phone ( ) \_\_\_\_\_ Ext \_\_\_\_\_

Work Phone ( ) \_\_\_\_\_ Ext \_\_\_\_\_

Cell Phone ( ) \_\_\_\_\_ Ext \_\_\_\_\_

Cell Phone ( ) \_\_\_\_\_ Ext \_\_\_\_\_

If parents are separated or divorced, with whom does the student live? \_\_\_\_\_

Emergency Contact (other than parents) \_\_\_\_\_

Name

Relationship

Phone#

I/We agree to support and abide by School regulations and guidelines throughout subsequent years of attendance. I further agree to hold Victory Christian Academy harmless for any and all liability that may result from my child attending or participating in all activities of Victory Christian Academy.

Parent/Guardian Signature \_\_\_\_\_

**THIS FORM WILL NOT BE ACCEPTED WITHOUT THE NON-REFUNDABLE RE-ENROLLMENT FEE OF \$50 PER STUDENT.**