

OFFICE USE ONLY	
Registration Fee Paid _____	SAT Test Date: _____
Gesell Screening Date _____	Student Interview Date _____

COMMUNITY CHRISTIAN SCHOOL
School Year 2016-2017

Financial Information			
Billing Option	12 Month		
If Pre K	2 day Full or 1/2 Day	3 day Full or 1/2 Day	5 day Full or 1/2 Day

Student's Information	
Last Name _____	Primary Address _____
First Name _____	
Middle Name _____	Current Grade Level _____
Nickname _____	Grade Level Entering _____
Birthdate _____	Gender _____
Social Security # _____	Ethnicity _____
Home Church _____	Religion _____

Mother's Information:	
Name _____	Address _____
Home Phone # _____	
Cell Phone # _____	Marital Status _____
Email _____	
Employer's Name _____	Employer's Phone # _____

Father's Information	
Name _____	Address _____
Home Phone # _____	
Cell Phone # _____	Marital Status _____
Email _____	
Employer's Name _____	Employer's Phone # _____

Grandparent Information	
Name _____	Address _____
Home Phone # _____	
Email _____	Cell Phone # _____

Grandparent Information	
Name _____	Address _____
Home Phone # _____	
Email _____	Cell Phone # _____

Community Christian School admits students of any race, color, national, or ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national, or ethnic origin in administration of its educational policies, scholarship and loan programs, athletic, and other school administered programs.