

Shorewood Christian School

New Family Information

1. Father - Stepfather - Guardian (Please circle one)

Last Name: _____ First Name: _____

Address: _____ City: _____ State: _____ Zip: _____

E-Mail Address: _____

Home Phone () _____ Cellular/Beeper # () _____

Employer: _____ Position: _____ Work Phone () _____

2. Mother - Stepmother - Guardian (Please circle one)

Mrs. Miss Ms.

Last Name: _____ First Name: _____

Address: _____ City: _____ State: _____ Zip: _____

E-Mail Address: _____

Home Phone () _____ Cellular/Beeper # () _____

Employer: _____ Position: _____ Work Phone () _____

3. With whom does the student reside? Both Parents Mother Father Guardian

4. Parents Marital Status: Married Separated Divorced Widowed Single

5. If divorced, who has legal custody of the child? _____

6. Please list additional children in the home:

Name	Age	Grade	School Attending
_____	_____	_____	_____
_____	_____	_____	_____

7. Name of Church attending: _____ Attend Regularly Occasionally

8. Father, accepted Jesus Christ as Lord and Savior? YES NO

9. Mother, accepted Jesus Christ as Lord and Savior? YES NO

10. What are your reasons for wanting to enroll your child(ren) in Shorewood Christian School?

11. How did you hear about Shorewood Christian School? _____