

Enrollment Application 2022-2023 School Year Registration Fee - \$225.00

GENERAL INFORMATION					
Child's Full Name:		Child's Birth Date:			
Gender:	Race/Ethnicity:	Grade Applying For:			
Does child live with both parents?:		If not, with whom?:			
Address:					
Mother/Guardian:		Cell:	Work:		
Mother/Guardian Employer:		Employer's Address:			
Father/Guardian:		Cell:	Work:		
Father/Guardian Employer:		Employer's Address:			
Father's Email:		Mother's Email:			
EMERGENCY CONTACTS (OTHER THAN PARENTS): EMERGENCY CONTACTS ARE AUTHORIZED TO PICK UP YOUR CHILD					
Full Name:		Relationship to Child:			
Address:		Cell:	Work:		
Full Name:		Relationship to Child:			
Address:		Cell:	Work:		
BACKGROUND INFORMATION					
Last School Attended:		Last Grade Completed:			
Address:					
Has your child been tested/evaluated for special education? For example, gifted or learning disability including speech or language delays? If yes, please explain. Please submit a copy of the evaluation.					
Child's interests and favorite activities:					

Specific fears, likes, or dislikes your child has that might help us to know him/her better:				
Name of person (if any) who referred you to STEPS Christian Academy:				
MEDICAL INFORMATION AND CONTACTS				
Physician's Name:	Phone:	Date of Last Exam: (Please provide copy of last physical)		
Address:				
Medical Insurance:	Medical Insurance #:			
Allergies:	Dietary Restrictions (vegan, vegetarian, no beef, etc):			
Medical and/or Emotional Problems:				
CONSENT FOR EMERGENCY TREATMENT				
I hereby give consent for my child				
Parent Signature:	Date:			
MEDIA RELEASE				
I give / do not give permission for STEPS Christian Academy to use photos or videos of my child,				
Parent Signature:	Date:			