



# Haywood Christian Academy

Embracing children, releasing leaders

P.O. Box 609 ▪ Lake Junaluska, NC 28745 ▪ (828) 627-0229 ▪ www.haywoodchristianacademy.org

## APPLICATION FOR RE-ENROLLMENT

### APPLICANT INFORMATION:

Currently in grade \_\_\_\_\_

Applying for grade \_\_\_\_\_

Applying for the school year \_\_\_\_\_

**Directions:** Please provide complete information for the following and return to HCA with the required registration fee. Students will be considered for re-enrollment after **all** required information and fees are received.

### GENERAL INFORMATION

Applicant Name: \_\_\_\_\_  
*First Middle Last "Nickname"*

Male  Female Age \_\_\_\_\_ Date of Birth \_\_\_\_\_

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

Home Phone _____	Home Email _____
Father's Name _____	Mother's Name _____
Cellular _____	Cellular _____
Bus. Phone _____	Bus. Phone _____
Pager _____	Pager _____
Email _____	Email _____
Occupation _____	Occupation _____
Employer _____	Employer _____

Which parent should be contacted first \_\_\_\_\_

Parents are:  married  divorced  separated  remarried  father deceased  mother deceased

Student lives with:  mother  father  other: \_\_\_\_\_

If parents are separated or divorced, what are the custody arrangements? (Custodial papers must be in office file)

\_\_\_\_\_

Emergency Contact (when parent cannot be reached)

\_\_\_\_\_  
*Name Phone Number(s)*

\_\_\_\_\_  
*Name Phone Number(s)*

### SIBLINGS

Name _____	Birthdate _____	School _____	Grade _____
Name _____	Birthdate _____	School _____	Grade _____
Name _____	Birthdate _____	School _____	Grade _____
Name _____	Birthdate _____	School _____	Grade _____

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Office Use Only

\_\_\_\_\_ Fee Received \_\_\_\_\_ Cash \_\_\_\_\_ Check \_\_\_\_\_ Date \_\_\_\_\_