



## EMERGENCY AND PICK UP PERMISSION LIST

Persons, in order, to contact in case of an emergency, if parents/guardians cannot be reached.

1. Name: \_\_\_\_\_ Phone: \_\_\_\_\_

2. Name: \_\_\_\_\_ Phone: \_\_\_\_\_

3. Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Persons with permission to pick up my child (not already listed): \_\_\_\_\_

Any special conditions, allergies, medications, or learning disabilities: \_\_\_\_\_

## SCHOOL RECORDS

New Students Only

Last school attended: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_  
Number & Street City State Zip

Reason for changing schools: \_\_\_\_\_

Grades: Excellent \_\_\_\_ Above Average \_\_\_\_ Average \_\_\_\_ Below Average \_\_\_\_ Poor \_\_\_\_

Has your student ever failed a grade? \_\_\_\_\_ If yes, which grade(s)? \_\_\_\_\_

Is your student in any remedial classes, or do they have an I.E.D. plan? (circle one) YES or NO

Has your student ever been suspended, dismissed, or expelled from school? (circle one) YES or NO

If yes, please explain, giving the school's name and dates. \_\_\_\_\_

## SPIRITUAL AND MORAL INFORMATION

New Students Only, or if changed

Have you read the "Statement of Faith"? Students \_\_\_\_ Parents \_\_\_\_

Have you placed your trust in Jesus Christ alone for your salvation? Students \_\_\_\_ Parents \_\_\_\_

Has your student ever used: Alcohol: \_\_\_\_ Tobacco: \_\_\_\_ Drugs: \_\_\_\_

Church Attending: \_\_\_\_\_ Pastor: \_\_\_\_\_

Are you a member? \_\_\_\_\_ Phone: \_\_\_\_\_

\_\_\_\_\_  
Father's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Mother's Signature

\_\_\_\_\_  
Date