# OFFICE USE ONLY \_\_\_ Application \_\_\_ Birth Certificate \_\_\_ Interview \_\_\_ Tuition Contract \_\_\_ Records \_\_\_ Registration Fee \_\_\_ Shots \_\_\_ Church Info



### **Martinsburg Christian Academy**

2247 Williamsport Pike Martinsburg, WV 25404 304.267.6368

mcawarriorswv.com

a ministry of Shenandoah Bible Baptist Church John Woullard, Pastor | Jordan Jones, Principal

# STUDENT APPLICATION 2024 - 2025

Print each student's full legal name.

Eirot	Middle	Loct	Student		Date of	Enteri
First	Middle	Last	goes by:	Gender:	birth:	grad
		HOME INFO	RMAIION			
Address:		011				
Str	reet	City		State	Zip	
Home Phone	e:					
		FAMILY INFO	RMATION			
Father's Nar	me:	N	Nother's Name:			
Occupation:		C	occupation:			
Employer:		Eı	mployer:			
Work Phone:		W	ork Phone:			
Cell Phone: _		C	ell Phone:			
Email:		Eı	mail:			
Parent's Marit	tal Status: Married_	Divorced	Remarried	Sinale	Widowed	4
	'divorced or child's re			-		
•				•	_	-
and rights to	information (attach s	separate sheet it ned	cessary):			

### STATEMENT OF NONDISCRIMINATION

Martinsburg Christian Academy admits students of any race, color, national and ethnic origin to all rights, privileges, and activities generally accorded or made available to students at the school. Martinsburg Christian Academy does not discriminate on the basis of race, color, national and ethnic origin in administration of its educational policies, admission policies, and athletic and other school-administered programs. We do not allow sodomites in our school because it is against our Statement of Faith, as we believe the Bible teaches.

## **EMERGENCY AND PICK UP PERMISSION LIST**

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

1. Name:		Phone:Phone:							
2. Name:									
3. Name:		Phone:							
Persons with permission to pick up my child (not already listed):									
Any special condition	s, allergies, medications,	, or learning disabilities:							
		OOL RECORDS w Students Only							
Last school attended:		Phone:							
Address:		City	State Zip						
		City	•						
-		Average Below							
	_	If yes, which grade(s)?	_						
-	_	hey have an I.E.D. plan? (circle							
-		· ·	•						
-	-	sed, or expelled from school?							
ir yes, piease explain,	giving the school's name	e and dates							
		MORAL INFORMATION	N						
Have you read the "St	latement of Faith"? Stud	lent(s) Parent(s)	_						
Have you placed you	r trust in Jesus Christ alon	e for your salvation? Student	(s): Parent(s):						
Has your student ever	used: Alcohol:	Tobacco: Dru	Jgs:						
Church Attending:		Pas	tor:						
Are you a member?	Phone:								
Father's Signature	Date	 Mother's Signature	Date						