



**CornerStone Christian Academy**  
 "A Precious CornerStone for a Sure Foundation" - Isaiah 28:16



**CornerStone Christian Ministries**  
 "...for the kingdom of God belongs to such as these" - Mark 10:14

## School Registration Application **\*OFFICIAL\***

**Student's Grade Level in 2016-17:** (circle one) K 1 2 3 4 5 6 Other: \_\_\_\_\_

**Student's Name:** \_\_\_\_\_

FIRST

MIDDLE

LAST

Birth Date: \_\_\_\_\_ State Where Born: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Who else takes care of the child? \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

In case of emergency call: \_\_\_\_\_ Phone: \_\_\_\_\_

Doctor: \_\_\_\_\_ Phone: \_\_\_\_\_

Major diseases child has had: \_\_\_\_\_

Allergies: \_\_\_\_\_

List names and ages of other children in family:

\_\_\_\_\_  
 \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

### ***NOTICE OF NONDISCRIMANTORY POLICY AS TO STUDENTS***

*CornerStone Christian Ministries, Inc., (dba: CornerStone Christian Academy) admits students of any race, color, national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national and ethnic origin in administration of its educational policies, admissions policies, scholarship and loan programs, and other school-administered programs.*