

Application for Admission

Laurel Academy

Candidate Information

Surname _____

Date of Birth / /
dd mm yyyy

Given Name(s) _____

Male Female

Address _____

Telephone () _____

Postal Code _____

Present School _____

Grade _____

Date of Proposed Entry _____

To Enter JK JK 1/2 day SK SK 1/2 day Grade

Father

Surname _____

Given Name(s) _____

Address (if different from child's address)

Postal Code _____

Home Phone _____ Work Phone _____

Cell (or other) Phone _____

Mother

Surname _____

Given Name(s) _____

Address (if different from child's address)

Postal Code _____

Home Phone _____ Work Phone _____

Cell (or other) Phone _____

Guardian if applicable

Surname _____

Given Name(s) _____

Address (if different from child's address)

Postal Code _____

Home Phone _____ Work Phone _____

Marital Status

Married Separated Divorced
Widowed Other

Custody of Child _____

Correspondence to be sent to:

Father Mother
Guardian Other

The undersigned agrees to pay Laurel Academy all charges and fees as outlined in the Annual Fee Schedule and to abide by the policies of Laurel Academy.

Signature _____ Date _____

Name (please print) _____

How did you hear about Laurel Academy? Yellow Pages Advertising Word of Mouth from _____