



FULL GOSPEL CHRISTIAN SCHOOL

A Ministry of the Full Gospel Church



110 Union St ♦ Westfield ♦ MA ♦ 01085

KINDERGARTEN APPLICATION

Application Date _____

Student Information

Full Name _____
Last First Middle

Address _____

City _____ State _____ Zip Code _____

Home Phone (____) _____

Date of Birth ____/____/____ Age: ____ years ____ months

Place of Birth _____ Male Female

Parent Information

Father:

Full Name _____
Last First Middle

Address _____

City _____ State _____ Zip Code _____

Work Phone (____) _____ Home Phone (____) _____

Cell Phone (____) _____

Occupation _____ Title _____

Business Name _____

Business Address _____

City _____ State _____ Zip Code _____

Mother:

Full Name _____
Last First Middle

Address _____

City _____ State _____ Zip Code _____

Work Phone (____) _____ Home Phone (____) _____

Cell Phone (____) _____

Occupation _____ Title _____

Business Name _____

Business Address _____

City _____ State _____ Zip Code _____

Church Background
(Please have your pastor fill this section out)

Church Name _____
Church Address _____
City _____ State _____ Zip Code _____
Church Phone (_____) _____ Years Attending _____
Church Denomination _____

Church Membership:

Mother and Father Mother Father Guardian
Stepmother Stepfather Neither Parent or Guardian

Please Check Appropriate Boxes:

Student Attends Church Regularly Parents Attend Church Regularly
 Student Attends Sunday School Parent(s) Serve in the Church

Pastor Name _____ Pastor Signature _____

Enrollment Agreement

I understand that *Full Gospel Christian School* does not discriminate in its admittance practices against any person due to race, color, national or ethnic origin or gender. Also, it does not discriminate on the basis of race, color, national or ethnic origin or gender in administration of educational policies, scholarship programs or any other school programs.

I hereby certify that the facts set forth in this *Student Application* are true and complete to the best of my knowledge. I understand that the falsification, failure to comply with *Full Gospel Christian School* rules and regulations or significant omission of fact may represent me from being admitted or if admitted may subject me to immediate dismissal.

I understand that in the event the student withdraws enrollment or is dismissed from *Full Gospel Christian School* during the course of the school year, tuition will not be refunded. However, all circumstances will be examined and evaluated on individual basis. In addition, all accounts must be paid before any student records are released.

I understand the philosophy and mission of *Full Gospel Christian School*. I have read and agree with the Statement of Faith. I have also read, understand and will comply with the rules and regulations

I certify that I have carefully read and do understand the above statements.

Signature of Father

Date

Signature of Mother

Date