

EVANGEL CHRISTIAN SCHOOL

STUDENT AND FAMILY INFORMATION SHEET (Complete one per student/per year)

School Year _____ - _____

STUDENT PERSONAL INFORMATION

Student Name: _____ Birth Date: _____ Sex: _____
(Last) (First) (Middle)

SS#: _____ Grade Entering: _____ Previous School Attended: _____

PARENT CONTACT INFORMATION

Father's Name: _____

Mother's Name: _____

Address: _____ City: _____ ST: _____ Zip: _____

Phones: (Father): _____ (Mother): _____ (Student): _____

Email Address (Father): _____

Email Address (Mother): _____

Email Address (Student): _____

FAMILY CHURCH PARTICIPATION INFORMATION

(I agree to notify ECS Administration of any changes in our Church Affiliation)

Church Name: _____ Member Active Participant

Student Church Name (if different): _____ Member Active Participant

INSURANCE INFORMATION

Name of Family Health Insurance: _____

Family Physician: _____ Phone: _____

Special Health Concerns: _____

LIABILITY RELEASE

I release Evangel Church, Evangel Christian School, and its representatives from any liability whatsoever arising from injury, damage, or loss that may occur while participating in any activity involving Evangel Christian School, either on or off the premises of Evangel Church.

I hereby certify that I am a parent or legal guardian of the above named student and that all of the above information is true and accurate.

Father's Signature: _____ Date: _____

Mother's Signature: _____ Date: _____

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EVANGEL CHRISTIAN SCHOOL

HOME SCHOOLING TO TRANSFORM THE CULTURE FOR CHRIST
- A MINISTRY OF EVANGEL PRESBYTERIAN CHURCH -

6/20/2013