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"Train up a child in the way he should go..." - Prov 22:6

NEW STUDENT / PARENT

PARENT'S NAME AND SURNAME:

TEL NO. / CELL NO.

EMAIL ADDRESS:

	CHILDREN'S FULL NAMES (As on Birth Certificate)	M/F	DATE OF BIRTH	AGE	PRESENT GRADE & SCHOOL	
1.	<input type="text"/>	<input type="radio"/> M <input type="radio"/> F	<input type="text"/>	<input type="text"/>	Grade:	<input type="text"/>
					School:	<input type="text"/>
2.	<input type="text"/>	<input type="radio"/> M <input type="radio"/> F	<input type="text"/>	<input type="text"/>	Grade:	<input type="text"/>
					School:	<input type="text"/>
3.	<input type="text"/>	<input type="radio"/> M <input type="radio"/> F	<input type="text"/>	<input type="text"/>	Grade:	<input type="text"/>
					School:	<input type="text"/>
4.	<input type="text"/>	<input type="radio"/> M <input type="radio"/> F	<input type="text"/>	<input type="text"/>	Grade:	<input type="text"/>
					School:	<input type="text"/>

Questions

1. How did you hear about the school?

2. Father's Occupation:

3. Mother's Occupation:

4. Church affiliation and attendance:

5. The reason wanting to change schools?

Reset

Submit