



Abbotsford Christian School

APPLICATION FOR REGISTRATION

Family Name: _____ **Date:** _____

Student Name: (last, first, middle) _____ Birth date: _____ Grade: _____

For office Use Only:	
Date Rec'd:	_____
Reg. Fee:	_____
Accepted by:	_____
Date:	_____
Start Date:	_____

School/Preschool previously attended:
 Name: _____ Address: _____

Parent/Guardian Information:

Mother/Guardian: _____
 Address: _____ City: _____ Province: _____
 Postal Code: _____ Phone: _____ Cell: _____
 Email: _____
 Church regularly attending: _____
 Employer: _____ Self Employed: Yes ___ No ___
 Occupation: _____ Work Phone: _____
 Canadian Citizen: Yes ___ No ___ If no: Landed Immigrant: Yes ___ No ___

Father/Guardian: _____
 Address: _____ City: _____ Province: _____
 Postal Code: _____ Phone: _____ Cell: _____
 Email: _____
 Church regularly attending: _____
 Employer: _____ Self Employed: Yes ___ No ___
 Occupation: _____ Work Phone: _____
 Canadian Citizen: Yes ___ No ___ If no: Landed Immigrant: Yes ___ No ___

Marital Status: Married Divorced Widowed Separated Single

Family Doctor: _____ Telephone: _____

Family Dentist: _____ Telephone: _____

Church Affiliation is a Requirement

Church Name: _____ Pastor's Name _____
 Members: Y N Years in Attendance: _____ Do you attend weekly? _____

ABBOTSFORD CHRISTIAN SCHOOL

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Tuition: Method of Payment

- In full on first day of school (2% discount)
- Two installments - Sept. 1 & Feb. 1st (1% discount)
- 10 month - pre-authorized payment plan
- 12 month - pre-authorized payment plan

Questions:

How do you promote a Christian lifestyle at home?

Please give a statement of your personal Christian faith.

Why do you wish to have your child(ren) enrolled at ACS?

What are your expectations of Abbotsford Christian School?

Has your child(ren) ever been suspended from school or placed on probation? Explain:

Are there any special needs/circumstances we should be aware of? Explain:

How did you hear about Abbotsford Christian School? Church _____ Newspaper

Yellow Pages Website Newspaper Referred by family/friend _____

Tuition being paid for by other
than applicant

Name: _____

Address: _____

Phone: _____

Relationship: _____

Signature: _____