



# Tree of Life Christian Preparatory School

A ministry of the Seventh-day Adventist Church

## Returning Student Application

Grade entering \_\_\_\_\_ in August 20\_\_\_\_

### Applicant Information

Applicant's full legal name: \_\_\_\_\_

First

Middle

Last

SSN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Has student been baptized since last school year? Yes \_\_\_\_\_ No \_\_\_\_\_ If so, date baptized \_\_\_\_\_

### Emergency Information

In case of an emergency, if we cannot reach you, whom do we call?

Name: \_\_\_\_\_

Telephone # \_\_\_\_\_

Relationship to student: \_\_\_\_\_

In case of an emergency, if you cannot be reached, do you give permission to Tree of Life Christian Preparatory School to have your child treated by a doctor or emergency room personnel? \_\_\_ Yes \_\_\_ No

If yes, please fill in your doctor's name and telephone number.

Name: \_\_\_\_\_

Telephone # \_\_\_\_\_

### Field Trip Information

My child, \_\_\_\_\_ has my permission to accompany Tree of Life Christian Preparatory School to any local setting for a field trip.

\_\_\_\_\_  
Parent's signature

\_\_\_\_\_  
Date

### Photo/Publication Authorization

Tree of Life Christian Preparatory School has permission to use my child's, \_\_\_\_\_, photo in administration authorized publications or videos.

\_\_\_\_\_  
Parent's signature

\_\_\_\_\_  
Date

"Tree of Life Christian Preparatory School admits students of any race, color, ethnic background, country of origin or gender; proffers all the rights, privileges, programs and activities generally available to students; and, makes no discrimination on the basis of race, color, ethnic background, country of origin or gender in administration of education policies, application for admission, scholarship programs, and athletic or extracurricular programs."

*"Preparing young minds for citizenship here on earth and for eternity."*

**Please list any changes in family information since last school year:**

Address: \_\_\_\_\_

Father's Contact information: \_\_\_\_\_

Mother's Contact Information: \_\_\_\_\_

Employment (either parent): \_\_\_\_\_

Church affiliation of either parent: \_\_\_\_\_ as of \_\_\_\_\_

Marital status change: \_\_\_\_\_ as of \_\_\_\_\_

Step-parent's name: \_\_\_\_\_

Change in custody: \_\_\_\_\_

Completed Application

Registration fee of \$250

Apply for student financial aid online at [www.FACTSmtg.com](http://www.FACTSmtg.com)