

Faith Baptist Christian Academy

Enrollment Application

Complete form and mail to:
FBCA, 1515 Wistar Road, Fairless Hills, PA 19030
along with a check for \$50.00 for the application fee.

Thank you.

Submission of this application is non-binding.

GENERAL INFORMATION:

Students Name: _____
(Last) (First) (Middle In.)

Mailing address: _____

School District: _____

Phone Number: _____ Sex: _____

Birthdate: _____ Social Sec. # _____

FAMILY INFORMATION

Father: _____ Work # _____

Mother: _____ Work # _____

Marital Status: Married Separated Divorced Widowed Single

Student Resides with: Both Parents Mother Father Other

Grandparents Names (one set): _____

Grandparents address: _____

CHURCH AFFILIATION

What church do you attend? _____ Member: Yes No

Church Address: _____

Pastor's Name: _____ Phone #: _____

BROTHERS & SISTERS

Name	School Attending	Current Grade

SCHOOL INFORMATION

Entering grade: _____ for the _____ school year.

Name of School: _____ Phone # _____

Address: _____

Why are you considering changing schools? _____

How did you hear about Faith Baptist Christian Academy: _____

(Parent Signature)

(Date)