

## **Application for Admission**

## Student Information

Student's Full Legal Name:		
Nickname:	Date of Birth://	Age:
Home Address:		
City:	State:	Zip:
Mailing Address (If Different):		
City:	State:	Zip:
Home Phone: (	Gender (Circle): Mal	e Female
Grade:		
Previous School(s) Attended:		
Parent/Guardian Information		
Father Full Legal Name:		
Mobile Phone: ()	Work Phone: (	_)
Occupation:	Email:	
Mother Full Legal Name:		
Mobile Phone: (	Work Phone: (	
Occupation:	Email:	
Please initialI wish to enroll my child at Canterbo	ury Classical School for the 2018-2	2019 school year.
Enclosed is my \$50 application fee p	per child. Upon final acceptance r	my application fee will be
credited towards the curriculum feeIf my child is accepted, I will be con	tacted to schedule an interview to	discuss the final details of
enrolling at Canterbury Classical School.	and the second with the second to	The state of the s
		1 1
Parent/Guardian Signature	Date	

Canterbury Classical School does not discriminate in any manner with regard to race, color, religion, sex, or national origin.