



Pueblo Christian Academy

Registration Application 2017-2018

Off-Site Learning Program/Ignitia Curriculum

CIRCLE ONE

3rd Grade 4th Grade 5th Grade 6th Grade 7th Grade 8th Grade

High School

Child's Name _____ Nickname _____ M or F _____ Age _____

Home address _____ PRIMARY PHONE # _____

City _____ State _____ Zip _____ BIRTH DATE _____

Lives with Mother Father Both Other _____ Date Registered _____

ALLERGIES (specify) _____

Ethnicity (for statistical purposes only) African American ___ Caucasian ___ Hispanic ___ Native American ___ Other _____

Mother's Name _____ Phone # _____ work/cell/home

Address _____ Phone # _____ work/cell/home

Email _____ Employer _____

Father's Name _____ Phone # _____ work/cell/home

Address _____ Phone# _____ work/cell/home

Email _____ Employer _____

Additional Information Staff may need to know _____

Signature _____

Date _____