

PK3-PK4 Application (Page 1)

for Heritage Hall Christian School

- PK3 MWF HALF-DAY
 PK3 FULL DAY w/ XC
 PK4 MWF HALF-DAY
 PK4 FULL DAY w/ XC



form APP-PK
year 18-19

Student Applicant

Applicant's Legal Name (First, Middle, Last)

Gender: Male Female

Applicant's Birth Date

Applicant's Age

Family Information

Mr. Dr.
 Other _____

Father's Name

Home Address

City

State

Zip

Home Phone

Cell Phone

Email Address

Mrs. Miss Dr.
 Other _____

Mother's Name

Home Address

Same as above

City

State

Zip

Home Phone

Cell Phone

Email Address

School Information

Has applicant previously attended preschool? yes no

Has applicant previously been in daycare? yes no

If yes, name of Preschool

If yes, name of Day Care

Preschool Director's name

Director's Phone

Day Care Director's name

Director's Phone

Church Information

Does your **family** regularly attend a Bible preaching church? Yes
 No

Name of Church

Church Address

City

Pastor's Name

Phone Number

May we call your pastor for a recommendation? Yes
 No



Visit us online at www.hhcsmuncie.org

Call us at (765) 289-6371

Email us at office@hhcsmuncie.org

Heritage Hall Christian School does not discriminate on the basis of race, color, gender, and national or ethnic origin.

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Salvation Testimony

Please write at least **one parent's** salvation experience and relationship with Christ.

Agreement

As parents, we understand that students must maintain a testimony consistent with the standards of the school. We agree to uphold the rules and standards of Heritage Hall Christian School as set forth in the Parent/Student Manual, and to abide by the decisions of the administration.

Father's Signature: _____

Mother's Signature: _____



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