

Pre-School Enrollment Form

for Heritage Hall Christian School

Office Use Only By: _____

Enrollment Fee Paid: _____

Date Received: _____



form HH-PK

year 18-19

Student Information *[Student must be 3 or 4 by Sept 1 regardless of date of enrollment.]*

1 <input type="checkbox"/> PK3 <input type="checkbox"/> PK4	<input type="checkbox"/> MWF Half-Day <input type="checkbox"/> 5-day Half-Day	Full Name (First, Middle, Last) Goes By: _____ Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female Date of Birth ____/____/____ Age _____
	<input type="checkbox"/> MWF Full-Day <input type="checkbox"/> 5-day Full-Day	
	<input type="checkbox"/> MWF Full-Day w/Extended Care (3:00-5:30) <input type="checkbox"/> 5-day Full-Day w/Extended Care (3:00-5:30)	
2 <input type="checkbox"/> PK3 <input type="checkbox"/> PK4	<input type="checkbox"/> MWF Half-Day <input type="checkbox"/> 5-day Half-Day	Full Name (First, Middle, Last) Goes By: _____ Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female Date of Birth ____/____/____ Age _____
	<input type="checkbox"/> MWF Full-Day <input type="checkbox"/> 5-day Full-Day	
	<input type="checkbox"/> MWF Full-Day w/Extended Care (3:00-5:30) <input type="checkbox"/> 5-day Full-Day w/Extended Care (3:00-5:30)	
3 <input type="checkbox"/> PK3 <input type="checkbox"/> PK4	<input type="checkbox"/> MWF Half-Day <input type="checkbox"/> 5-day Half-Day	Full Name (First, Middle, Last) Goes By: _____ Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female Date of Birth ____/____/____ Age _____
	<input type="checkbox"/> MWF Full-Day <input type="checkbox"/> 5-day Full-Day	
	<input type="checkbox"/> MWF Full-Day w/Extended Care (3:00-5:30) <input type="checkbox"/> 5-day Full-Day w/Extended Care (3:00-5:30)	

Male Parent/Legal Guardian (with whom the student lives)

Relationship to Student <input type="checkbox"/> Father <input type="checkbox"/> Other _____	<input type="checkbox"/> Resides with student? <input type="checkbox"/> Legal Guardian?	Marital Status (May check more than one) <input type="checkbox"/> Single <input type="checkbox"/> Widowed <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Remarried <input type="checkbox"/> Separated
<input type="checkbox"/> Mr. <input type="checkbox"/> Dr. <input type="checkbox"/> Other _____	Name _____	Email Address _____
Home Address _____	City _____	State _____ Zip _____
County _____	Home Phone _____	Cell Phone _____ Work Phone _____ Ext. _____
Occupation _____	Employer _____	Employment Address _____
Work E-mail Address _____	Other Work Contact <input type="checkbox"/> Cellular <input type="checkbox"/> Pager <input type="checkbox"/> Other _____	

Male Parent/Legal Guardian Church Information

Local Church _____	City _____
Member? <input type="checkbox"/> Yes <input type="checkbox"/> No	Attend Regularly? <input type="checkbox"/> Yes <input type="checkbox"/> No
Born Again? <input type="checkbox"/> Yes <input type="checkbox"/> 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.

Pre-School Enrollment Form (Page 2)

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Female Parent/Legal Guardian (with whom the student lives)

Relationship to Student

Mother
 Other _____

Resides with student?
 Legal Guardian?

Marital Status

(May check more than one)

Single
 Married
 Remarried
 Widowed
 Divorced
 Separated

Mrs. Miss Dr.
 Other _____

Name

Email Address

Home Address

City

State

Zip

County

Home Phone

Cell Phone

Work Phone

Ext.

Occupation

Employer

Employment Address

Work E-mail Address

Other Work Contact

Cellular
 Pager
 Other _____

Female Parent/Legal Guardian Church Information

Local Church

City

Member? Yes No
Attend Regularly? Yes No
Born Again? Yes No

Parent Signatures

Withdrawal/Release

The enrollment fee is nonrefundable and is required to hold class space.

Heritage Hall has a non-refundable tuition policy for **each semester**. Tuition is pro-rated according to the percentage of a month or grading period enrolled. Records will not be released until all balances are paid in full.

The undersigned responsible party is obligated to pay the full tuition for the semester enrolled whether or not the student completes the semester. This includes a student who withdraws or is dismissed for any reason other than (1) moving from the area, (2) academic recommendation from the administration, or (3) other extenuating circumstances such as loss of income.

Your signature below indicates you have read the Parent/Student Manual (available on our website). If, at any time, you have questions, concerns, or disagreements with the administering of these policies, you are encouraged to bring your concerns to the appropriate administrator rather than discussing the issue with other parents or those outside the school who have no authority to effect a change.

Father/Male Guardian Signature

Printed Name

Date

Mother/Female Guardian Signature

Printed Name

Date



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