

**Montgomery Public Schools**  
**CHURCH SCHOOL ENROLLMENT FORM**

***I. TO BE COMPLETED BY THE PARENT OR GUARDIAN***

Student's Name \_\_\_\_\_ Home Phone \_\_\_\_\_  
Home Address \_\_\_\_\_ Zip \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_  
Parent or Guardian Name \_\_\_\_\_ Home Phone \_\_\_\_\_  
Home Address \_\_\_\_\_ Zip \_\_\_\_\_

***CHURCH SCHOOL ENROLLMENT*** \_\_\_\_\_

School Address \_\_\_\_\_ Zip \_\_\_\_\_ School Phone \_\_\_\_\_

\_\_\_\_\_  
**Signature of Parent or Guardian** **Date**

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***II. TO BE COMPLETED BY CHURCH SCHOOL ADMINISTRATOR***

Church School Name \_\_\_\_\_ School Phone \_\_\_\_\_  
School Address \_\_\_\_\_ Zip \_\_\_\_\_  
Date of Enrollment \_\_\_\_\_ School Year 20\_\_\_\_ - 20\_\_\_\_

\_\_\_\_\_  
**Signature of Administrator** **Date**

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***III CONSENT FOR NOTIFICATION OF STUDENT WITHDRAWAL***

I hereby give prior consent to the administrator of \_\_\_\_\_  
Church School to notify the public school superintendent should the above-named  
student cease attendance at said school.

\_\_\_\_\_  
**Signature of Parent or Guardian** **Date**