



# Memorial Christian School & Daycare

4905 South Highway 16 | Rapid City, SD 57701

(CHILD'S LAST NAME) (FIRST) (MIDDLE)

(BIRTH DATE) (AGE) (M/F)

(SOCIAL SECURITY NUMBER)

(ADDRESS)

(CITY) (STATE) (ZIP)

(HOME PHONE)

(MAILING ADDRESS - IF DIFFERENT FROM ABOVE)

## GRADE THIS FALL:

PRESCHOOL – MWF (AM) \_\_\_\_\_ MWF (PM) \_\_\_\_\_ T/TH (AM) \_\_\_\_\_

ALL-DAY KINDERGARTEN \_\_\_\_\_

1ST \_\_\_\_\_ 2ND \_\_\_\_\_ 3RD \_\_\_\_\_ 4TH \_\_\_\_\_ 5TH \_\_\_\_\_ 6TH \_\_\_\_\_

SCHOOL ONLY \_\_\_\_\_ DAYCARE ONLY \_\_\_\_\_

## HOURLY DAYCARE \_\_\_\_\_

Schedule Varies \_\_\_\_\_

( M T W T F ) Approx. Time \_\_\_\_\_ am/pm TO \_\_\_\_\_ am/pm

## FULLTIME DAYCARE \_\_\_\_\_

Schedule Varies \_\_\_\_\_

( M T W T F ) Approx. Time \_\_\_\_\_ am/pm TO \_\_\_\_\_ am/pm

Answer BOTH questions.

1. Is this student (or you) Hispanic or Latino? (Choose only one)

\* No not Hispanic or Latino

\* Yes, Hispanic or Latino ( A person of Mexican, Puerto Rican, Cuban, South or Central American, or other Spanish culture or Origin regardless of race).

2. What is the student's (or your) race? (Regardless of how you answered the first question, choose one or more).

\* American Indian or Alaska Native ( A person having origins in any of the original peoples of North and South America, including Central America, and who maintains tribal affiliation or community attachment)

\* Asian (A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent Including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam).

\* Black or African American (A person having origins in any of the black racial groups of Africa).

\* Native Hawaiian or Other Pacific Islander (A person having Origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands).

\* White (A person having origins in any of the original peoples of Europe, the Middle East, or North Africa).

HAS YOUR CHILD EVER BEEN DISMISSED FROM SCHOOL? \_\_\_\_\_

If so why? \_\_\_\_\_

HOW DID YOU HEAR ABOUT MCS? \_\_\_\_\_

PARENTS: MARRIED \_\_\_\_\_ SINGLE \_\_\_\_\_ DIVORCED \_\_\_\_\_

(FATHER'S NAME) (CELL PHONE)

(FATHER'S E-MAIL – FOR BILLING AND UPDATES)

(EMPLOYER) (WORK PHONE)

(MOTHER'S NAME) (CELL PHONE)

(MOTHER'S E-MAIL – FOR BILLING AND UPDATES)

(EMPLOYER) (WORK PHONE)

(GUARDIAN NAME) (CELL PHONE)

(EMPLOYER) (WORK PHONE)

WHAT CHURCH DO YOU ATTEND? \_\_\_\_\_

## (PHYSICAL OR MEDICAL PROBLEMS THE TEACHER SHOULD KNOW)

(EMERGENCY CONTACT) (PHONE)

(CHILD'S DOCTOR) (PHONE)

(TYPE OF INSURANCE)

## (PUBLIC SCHOOL YOUR CHILD WOULD BE ATTENDING)

(NAME OF LAST SCHOOL ATTENDED)

I HAVE READ THE SCHOOL POLICY IN REGARD TO THE SPIRITUAL PHILOSOPHY, THE ATTENDANCE POLICY, THE DISCIPLINE PROCEDURE AND THE FINANCIAL POLICY REQUIREMENTS. I UNDERSTAND THE POLICIES AND AGREE TO ABIDE BY THEM AND TO SEE THAT MY CHILD ABIDES WITH THEM. MCS BELIEVES THAT YOUR INTEREST AND INVOLVEMENT IN YOUR CHILD'S EDUCATION IS ONE OF THE KEYS TO SUCCESS - THEREFORE WE EXPECT PARENTS TO BE INVOLVED IN OUR SCHOOLS PARENT/TEACHER ORGANIZATION (PTO).

(PARENT/GUARDIAN SIGNATURE) (DATE)

FERPA Parent notification information

Memorial Christian School may disclose, without consent, "directory" information, web site pictures & information, honors & awards to the newspaper, school web site and press. If a parent does NOT wish for information to be released, please sign a request that the school DOES NOT DISCLOSE the information about your child/children.