



RMCA
ROCKY MOUNTAIN
CHRISTIAN ACADEMY

New Student Application For Enrollment

9447 Niwot Rd., Niwot, CO 80503 (303) 652-9162 www.rmcaonline.org

Student Information

Student's last name (print or type):	First name:	<input type="checkbox"/> Male <input type="checkbox"/> Female	Date of birth (month/day/year):	Age:
Last school student attended, with address and phone number:	Grade or class entering: <input type="checkbox"/> Mom's Day Out (13 to 24 months) <input type="checkbox"/> Mom's Day Out (25 to 36 months) <input type="checkbox"/> 3-year-old preschool <input type="checkbox"/> 4-year-old preschool <input type="checkbox"/> 5-year-old preschool <input type="checkbox"/> Kindergarten <input type="checkbox"/> Grade _____ (1,2,3,4,5,6,7,8)		Race: <input type="checkbox"/> African American <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Native American <input type="checkbox"/> Hispanic <input type="checkbox"/> White <i>Please check all that apply. Providing this information is voluntary. RMCA is required to report composite information to government and accrediting agencies.</i>	

Parent Information

<input type="checkbox"/> Mr. Father's (or guardian's) last name: <input type="checkbox"/> Dr.		First name:		Home phone:	
Street Address:		City:		Zip code: Cell phone:	
Father's Occupation:		Employer (name and address):		Daytime phone:	
Father a Christian? <input type="checkbox"/> yes <input type="checkbox"/> no		Church regularly attends:		E-mail address:	
<input type="checkbox"/> Mrs. Mother's (or guardian's) last name: <input type="checkbox"/> Ms. <input type="checkbox"/> Dr.		First name:		Home phone:	
Street Address:		City:		Zip code: Cell phone:	
Mother's Occupation:		Employer (name and address):		Daytime phone:	
Mother a Christian? <input type="checkbox"/> yes <input type="checkbox"/> no		Church regularly attends:		E-mail address:	
With whom does the student(s) live? <input type="checkbox"/> both parents <input type="checkbox"/> mother only <input type="checkbox"/> father only <input type="checkbox"/> parent and step-parent <input type="checkbox"/> grandparents <input type="checkbox"/> other _____					
Emergency contact:		Relationship:		Phone:	

RMCA publishes an annual school directory for the convenience of our families. If you **do not** wish to have your information included in this directory for the 2005-06 school year, please initial the appropriate space(s) below:

- _____ Please DO NOT publish my family's telephone number
 _____ Please DO NOT publish my family's address



For Office Use Only: Enrollment date _____ Class _____ Room _____ Start date _____
