



# LifeWay Academy

The Way ♦ The Truth ♦ The Life

Marsh Harbour, Abaco, Bahamas  
lifewayabaco@gmail.com  
www.lifewayabaco.com  
1(242) 699-3900

## APPLICATION FOR ENROLLMENT

Student's Name: \_\_\_\_\_  
Last First Middle

Name called: \_\_\_\_\_ Circle Gender: Male / Female

Nationality: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age September 1<sup>st</sup>: \_\_\_\_/\_\_\_\_  
Month Day Year Years old Months

Physical handicaps: \_\_\_\_\_ National Insurance #: \_\_\_\_\_

Allergies: \_\_\_\_\_

Present school attending: \_\_\_\_\_

Principal: \_\_\_\_\_ Contact Information: \_\_\_\_\_

Grade attended at school: \_\_\_\_\_ Language used at home: \_\_\_\_\_

Place of residence: \_\_\_\_\_ Students email: \_\_\_\_\_

Mailing address: \_\_\_\_\_

How does the child get to school? Bus, ferry, taxi, parent drop off. If child does not come by parent drop off please give details: \_\_\_\_\_

Name of Person responsible / Phone contact: \_\_\_\_\_

### SIBLINGS (brothers and/or sisters) attending LifeWay Academy:

Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Name: \_\_\_\_\_ Grade: \_\_\_\_\_

### PARENT/GUARDIAN INFORMATION:

First Name: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

Last Name: \_\_\_\_\_ Cell phone number: \_\_\_\_\_

Employer: \_\_\_\_\_ Email address: \_\_\_\_\_

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First Name: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

Last Name: \_\_\_\_\_ Cell phone number: \_\_\_\_\_

Employer: \_\_\_\_\_ Email address: \_\_\_\_\_

Circle Parent's Marital Status: Single Parent / Married / Separated / Divorced / One Deceased / Re-married

### RESPONSIBLE ADULT EMERGENCY CONTACTS, if a parent cannot be contacted.

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_ Relationship to Student: \_\_\_\_\_

Location: \_\_\_\_\_ Location: \_\_\_\_\_

Phone #: \_\_\_\_\_ Phone #: \_\_\_\_\_

### TO BE COMPLETE BY LifeWay Academy OFFICE PERSONNEL /DATES OF:

Application for Enrollment Turned In: \_\_\_\_/\_\_\_\_/\_\_\_\_ Enrollment Accepted: \_\_\_\_/\_\_\_\_/\_\_\_\_

**\$100.00** Enrollment Fee (Non-Refundable) Paid: \_\_\_\_/\_\_\_\_/\_\_\_\_ Copy of last report card: \_\_\_\_/\_\_\_\_/\_\_\_\_

\$ \_\_\_\_\_ Grade Assesment Fee (Non-Refundable) Paid: \_\_\_\_/\_\_\_\_/\_\_\_\_

Copy of last report card: \_\_\_\_/\_\_\_\_/\_\_\_\_ Copy of Passport: \_\_\_\_/\_\_\_\_/\_\_\_\_ Copy of Birth Certificate: \_\_\_\_/\_\_\_\_/\_\_\_\_

Medical Form: \_\_\_\_/\_\_\_\_/\_\_\_\_ Medical Consent Form: \_\_\_\_/\_\_\_\_/\_\_\_\_ Copy of Immunization Card \_\_\_\_/\_\_\_\_/\_\_\_\_