

MEMORIAL HALL SCHOOL

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2021-2022 ENROLLMENT FORM

STUDENT ID# _____

DATE _____ GRADE _____ AGE _____ GENDER M F

STUDENT NAME _____ **NICKNAME** _____
LAST FIRST MIDDLE

STUDENT'S EMAIL ADDRESS _____

STUDENT'S CELL PHONE _____ CARRIER _____
(EX: ATT, SPRINT, T-MOBILE)

CURRENT ADDRESS _____ CITY/ST. _____ ZIP _____

BIRTHDATE _____ PLACE OF BIRTH _____ PASSPORT # _____

MOTHER/NAME _____

MOTHER'S EMAIL _____ CELL PHONE _____

FATHER/NAME _____

EMAIL _____ CELL PHONE _____

STUDENT LIVES WITH
RELATIONSHIP. (EX: AUNT, UNCLE, GRANDPARENTS, GUARDIAN) _____

GUARDIAN'S NAME _____

ADDRESS _____ CITY _____

STATE _____ ZIP CODE _____ CELL PHONE _____

EMAIL _____ CELL PHONE CARRIER _____
(EX: ATT, SPRINT, T-MOBILE)

NAME OF PERSON WILL BE RESPONSIBLE FOR PAYING TUITION FOR THIS STUDENT

BILLING ADDRESS _____ CITY _____

STATE _____ ZIP CODE _____ BILLING PHONE NUMBER _____

EMAIL _____

LIST OTHER CHILDREN IN THE FAMILY:

AGE:

FOREIGN STUDENTS ONLY

I - 20 GUARDIAN'S NAME _____

GUARDIAN'S EMAIL _____

I - 20 GUARDIAN'S ADDRESS _____ CITY _____

STATE _____ HOME PHONE / WORK PHONE _____

CELL PHONE _____ CARRIER _____

(EX: ATT, SPRINT, T-MOBILE)

GUARDIAN'S OCCUPATION _____ EMPLOYER _____