



Student Registration Form

Equipping students for the future, academically, emotionally, spiritually

Mailing Address: 880 Hershey Ave. Lancaster, PA 17603

Phone: (717) 715-0099

Today's Date: _____

Grade Currently Attending: _____

Name of Pupil: _____
(Last Name) (First Name) (Full Middle Name)

Address: _____

Phone Number: _____ Email: _____

Date of Birth: _____ Sex: M F Where Born: _____

Does student have an IEP (individual Education Plan) Yes or No

Name of Father: _____
(Last Name) (First Name) (Full Middle Name)

Address (if different from child): _____

Home Phone Number: _____

Living

Work Number: _____

Deceased

Cell Phone Number: _____

Name of Mother: _____
(Last Name) (First Name) (Full Middle Name)

Address (if different from child): _____

Home Phone Number: _____

Living

Work Number: _____

Deceased

Cell Phone Number: _____

If child lives with someone other than parent(s) complete the following:

Name of Guardian: _____ Relationship: _____

Home Phone Number: _____ Work Number: _____

Cell Phone Number: _____

Emergency Contact: (Please indicate someone other than parents/guardian)

Name: _____
(Last Name) (First Name) (Full Middle Name)

Address: _____

Relationship to Student: _____ Telephone Number: _____

Previous Education:

Has the student attended any United States schools including Puerto Rico in any 3 years during his/her lifetime?

If yes complete the following:

Name of School	City & State	Grade Attended	Dates Attended
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Medical Information:

List any medical condition(s) your child has that we should know about (including allergies)

Family Doctor: _____ Phone Number: _____

Dentist: _____ Phone Number: _____

Please select race(s) and number all that apply below (must select at least one)

Race: American Indian or Alaskan Native _____ Asia _____
Black or African American _____ White _____
Native Hawaiian or Other Islander _____

Language spoken at home: _____ Is student of Latino/Hispanic Ethnicity? Yes or No

Parent/Guardian Statement of Understanding (Please initial each line)

- _____ 1. We recognize that Way of Jesus Academy (WOJA) is a Christian ministry organization.
- _____ 2. We pledge our support of the school and its administration. We agree not to make demands, threaten to sue, make any kind of accusation or complaint, or actually litigate any matter whatsoever.
- _____ 3. We have received, the WOJA Student Handbook and have read and understood it in its entirety.
- _____ 4. We understand that our child will receive spiritual training and instruction consistent with the school and the "Statement of Faith" which can be found in the Student Handbook.
- _____ 5. We agree that WOJA needs our participation in lending practical help and prayer support in a mutual effort to train our children.
- _____ 6. We understand that WOJA reserves the right to suspend or dismiss any student who does not cooperate with the educational process.
- _____ 7. We release WOJA from any responsibility for accidents that may occur on the school grounds or at school-sponsored activities.
- _____ 8. We authorize the WOJA staff to relate with our child as described in the "Physical Contact and Restraint Policy" which can be found in the Student Handbook.
- _____ 9. We permit WOJA to use any pictures of our child taken while at school or participating in an approved school activity in any informational or promotional materials produced by the school, including, but not limited to, newsletters, brochures, displays, and audio-visual presentations.
- _____ 10. We hereby grant permissions for our child to attend and participate in all WOJA field trips. We will not hold WOJA or its employees responsible for injury to our child, or for loss, theft, or damage to his/her property while involved in these activities.

Request for Textbooks & Materials (not to include K-4 students)

Pennsylvania provides textbooks and certain instructional materials to students in private schools. Parents, guardians, or persons in loco parentis shall request the loan of such materials by initialing the line below.

_____ I hereby request the loan of instructional materials and textbooks in accordance with Act 90 of 1975 and Act 195 of 1972 for my child attending K-5 through 8th grade in Way of Jesus Academy.

I certify that the foregoing statements made by me are true:

(Printed Name) (Signature) (Date)

(Printed Name) (Signature) (Date)