

Bethel Life School

3777 S. Meridian Wichita, KS 67217 (316) 522-7148

FAMILY APPLICATION

	Last name	First name	Middle Initial	Occupation	Business
					Phone
Father					
Mother					
Guardian					
Family Address		City	State	Zip Code	Home Phone

Marital Status: (check one)

Father: First Marriage ___ Widowed ___ Separated ___ Divorced ___ Remarried ___ Unmarried ___

Mother: First Marriage ___ Widowed ___ Separated ___ Divorced ___ Remarried ___ Unmarried ___

We would like to enroll the following childred to begin (month) _____ (year) _____

	1st Child	2nd Child	3rd Child	4th Child
Names of Children: First:				
Middle:				
Last:				
Nickname; if any:				
Grade to Enter:				
Age:				
Date of Birth:				
Our child by: Birth:				
Adoption:				
Previous School:				
Grade level repeated: (if any)				

Names and ages of all other children in family: _____

Nondiscriminatory Policy: Bethel Life School admits students of applicable age, regardless of gender, race, color, or national or ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students of the school. We welcome students of all races and nationalities who willfully submit to the Statement of Faith.

List last grades available for each child:

Name:				
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Dates these grades cover:	From: To:	From: To:	From: To:	From: To:
Name of School				
Reading:				
Spelling:				
Language:				
Mathematics:				
Science:				
History				
Social Studies				

Statement of personal Christian experience and faith:

Father: _____

Mother: _____

Church or denominational affiliation:

Father: Church now attending: _____ Regular ___ Occasional ___
 Mother: Church now attending: _____ Regular ___ Occasional ___
 Children: Church now attending: _____ Regular ___ Occasional ___

Family References: Name Adress Phone

1 _____
 2 _____

Have you or anyone in your family previously attended BLS? _____
 Who referred you to BLS? _____

State in detail why you wish your child(ren) to attend BLS _____

Please include a picture of the family.

We understand that our child(ren) will be taught in accordance with the BLS Statement of Faith.
 Falsification of information may result in dismissal.

Signed: Father _____ Mother _____
 Date _____ Date _____