



Sunshine
Christian School

2023 - 2024

Registration Form

Phone: (915) 857-5100 Fax: (915) 857-1767
school@sunshinechristianschoolep.com

Registration Form must be completely filled out in order
to be considered for further processing

Date: _____
Pd. RGF: _____
Staff Initials: _____
Office Note: _____

Student Information

Name (First, MI, Last) _____ Name To Be Called At School _____ Gender _____ D.O.B. _____

Street Address _____ City _____ State _____ Zip Code _____ Home Phone _____

Last School Attended _____ List All Past SCS Teachers _____ Last Grade Completed _____

How did you hear about Sunshine? _____ Referred by: _____

Please circle the grade level your child is registering for:

- Preschool & K4 please circle the days.
My second choice is _____
- K5 please circle full time or half day.

Grade Level			Time	Elementary	
Preschool	3D	5D	AM	1st	2nd
K4	3D	5D	AM	3rd	4th
K5		5D	Full time / Half day	5th	

Parent Information

Father's Name _____		Mother's Name _____	
Employer _____		Employer _____	
Occupation _____		Occupation _____	
Work # _____	Cell # _____	Work # _____	Cell # _____
E-mail _____		E-mail _____	

I understand _____ will be enrolled when I complete and turn in the required :

- Enrollment Form and documents
- Student fee **(Due May 15)**

All the following documents must be turned in **with the enrollment form**.

- ____ 1. Birth certificate
- ____ 2. Current immunization record or exemption
- ____ 3. Physical health form (Required for 4 years of age thru 5th grade)
- ____ 4. Food allergy form, if applicable
- ____ 5. Hearing & vision (Required for 4 years of age thru 5th grade)
- ____ 6. A photo of child and parents
- ____ 7. Legal custody documentation, if applicable
- ____ 8. Most recent report card K5 - 5th grade (new students)
- ____ 9. Testing fee (new students only)

Parent Signature _____ Date _____