



**Dadeville Christian Academy Church School Enrollment Form**

|                          |                        |
|--------------------------|------------------------|
| School Year<br>2011-2012 | Public School District |
|--------------------------|------------------------|

**Part 1 - To be completed by Parent or Guardian**

|                                 |               |                         |
|---------------------------------|---------------|-------------------------|
| Students Name                   | Date of Birth | Grade                   |
| Parent or Guardian's Name       | Home Phone    |                         |
| Address                         | City          | State<br><i>Alabama</i> |
|                                 |               | Zip Code                |
| Current School of Enrollment    | School Phone  |                         |
|                                 |               |                         |
| Signature of Parent or Guardian | Date          |                         |

**Part 2 - Consent for Notification of Student Withdrawal**

|  |      |
|--|------|
| I hereby give prior consent to the Administrator of DCA to notify the Public School Superintendent should the above named Student cease attendance at said School. |      |
|  |      |
| Signature of Parent or Guardian  | Date |

**Part 3 – To be completed by Church School Administrator**

|   |                                       |                                      |
|---|---------------------------------------|--------------------------------------|
| Church School of Enrollment<br><b>Dadeville Christian Academy</b> | School Phone<br><b>(256) 596-3411</b> | Admin Phone<br><b>(256) 373-5164</b> |
| Address   | City                                  | State                                |
| <b>P.O. Box 677</b>   | <b>Dadeville</b>                      | <b>Alabama *</b>                     |
|   |                                       | Zip Code<br><b>36853</b>             |
| Date of Student Enrollment  | School Year                           |                                      |
|   |                                       |                                      |
| <i>Signature of Church School Administrator</i>                   | Date                                  |                                      |

Original to local school superintendent - Copy 1 to school file - Copy 2 to parents

*\* Due to the varying Homeshool laws from state to state we only offer church school covering for students that reside in, and have an Alabama mailing address.*