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GGCA.org

Education WITH
AN *Eternal Purpose*

2010 – 2011 ADMISSIONS FORM

PLEASE PRINT AND COMPLETE ENTIRE FORM

Does your family regularly attend Greater Grace World Outreach Church Services? Yes No
If not, please tell us where your family attends church: _____

STUDENT INFORMATION

Name _____ SS# _____
last (suffix, Jr., I, II, etc.) first middle preferred name

Address _____ City _____ State _____ Zip Code _____

Date of Birth ____/____/____ Female Male Place of Birth _____

Enrollment for grade _____ Student's cell phone # _____

PARENT INFORMATION: Please check only one. Parent Guardian

MOTHER/GUARDIAN INFORMATION Check if child lives with this parent

FATHER/GUARDIAN INFORMATION Check if child lives with this parent

Name _____

Name _____

Address _____
Street Apt.

Address _____
Street Apt.

City State Zip

City State Zip

Home Phone _____

Home Phone _____

Work Phone _____

Work Phone _____

Cell Phone _____

Cell Phone _____

Occupation _____

Occupation _____

E-mail Address _____

E-mail Address _____

Check if appropriate: Father Deceased Mother Deceased Parents Divorced Parents Separated

Does the applicant live with someone other than the parent(s)? Yes No

If yes, is the person the legal guardian? Yes No. Please state name and relationship and provide a copy of the court document proving guardianship.

EMERGENCY CONTACTS:

Please list 3 people (other than parent or guardian) who can assume responsibility for your child in the event that we cannot reach you. Keep a record of whom you have listed so that you can refer to it in an emergency. Also provide an out-of-state contact in the event of a statewide emergency.

1. _____ Tel: _____ Cell: _____ Relationship: _____

2. _____ Tel: _____ Cell: _____ Relationship: _____

3. _____ Tel: _____ Cell: _____ Relationship: _____

Out of State Relative: _____ Tel: _____ Cell: _____ Relationship: _____

I hereby give permission for any of the above individuals to pick up my children if they are ill and I cannot be reached OR if there is an emergency situation wherein a child would need to be evacuated from the GGCA premises.

Parent Signature (REQUIRED)

Date