

House Of Prayer Christian School
Pre-Registration Form 2023/2024

Student Information:

*Student's Legal Full Name: _____

Grade Level: _____

Age: _____

Birth Date: _____

Address:
(Street) _____

(City) _____ (Zip) _____

Phone #: _____

County: _____

Parent /Guardian Information:

Mother's Full Name: _____

Cell Phone # _____ Work # _____

Email: _____

Father's Full Name: _____

Cell Phone # _____ Work # _____

Email: _____

Siblings Attending:

How Many: _____

Siblings Names: _____

Signature of
Parent/Guardian: _____ **Date:** _____