



Brookstone Christian Academy

2393 North Monroe Street, Monroe, Michigan 48162
 (734)241-3130 | Admin@BrookstoneChristian.org
 www. BrookstoneChristian.org

Application for Admission

1. Student Information

Date: _____

Last Name	First Name	MI	DoB	Sex
Address		City	State	Zip

Enrollment (circle one): **NEW** **RETURNING** Grade applying for: _____

2. Parent/Guardian Information

Name (Last, First, MI)	Name (Last, First, MI)
Address (if different from student)	Address (if different from student)
Employer	Employer
Employer's Address	Employer's Address
Phone Work Home Cell Other	Phone Work Home Cell Other
E-mail address	E-mail address
Home Church	Home Church

3. Siblings

Name	DoB	Name	DoB
Name	DoB	Name	DoB

4. Before and After school care needed
 AM care runs from 7:00am – 8:15am, PM care is from 3:00pm (12:00 noon on early release days) – 6:00pm and is billed in ¼ hour intervals. See the schedule of rates and fees for current rates. (circle as needed)

MON	TUES	WED	THUR	FRI
AM	AM	AM	AM	AM
PM	PM	PM	PM	PM

FOR OFFICE USE ONLY			
Date Applied	Accepted: Y N <input type="checkbox"/> INIT	Start Date	Beginning Classroom K 1 2 3 4 5 6
Referral Source:		Discount Source:	

*I will instruct you and teach you in the way you should go;
 I will guide you with my eye upon you. (Psalm 32:8)*