



Application for Admission

Junior Primary

I/We hereby make application to Summit Academy for the admission of:

Surname: _____

Given Names: *(circle names used)* _____

Date of Birth: _____

Gender: _____

Start Date: _____

Present Pre-School or Daycare *(if applicable)* _____

School Telephone: _____ Contact: _____

Name of Parent 1: _____

Address: _____ Postal Code: _____

Employer: _____ Occupation: _____

Telephone: Home: _____ Cell: _____

Email : _____

Name of Parent 2: _____

Address: _____ Postal Code: _____

Employer: _____ Occupation: _____

Telephone: Home: _____ Cell: _____

Email : _____

Student Lives with: Parent 1: _____ Parent 2: _____ Both: _____ Other: _____

If student is part of any separation or divorce agreement, please state the terms: _____

Allergies or medical conditions: _____

A \$100 application fee is to accompany this application.