hope **CHRISTIAN ACADEMY**
920 Holley Ave, Suite 2 ~ St. Paul Park, MN 55071
(651) 459-6438

REGISTRATION FOR SUMMER SCHOOL

(Monday – Friday, 9:00-11:30 a.m.)

Students not currently enrolled at HCA must fill out an application and complete the interview process in addition to this registration form.

Student's Name_____
Last First Middle Initial

Sex _____ Age _____ Birth Date _____ Grade last completed _____

Home Address _____

City _____ Zip _____

Telephone # _____ Social Security #_____

E-mail address _____

Emergency Telephone # _____Today's Date_____

Emergency Contact's Name _____

Please indicate which session(s) you are enrolling for:

☐**Session I (June 14 – July 9, 2010)**

☐**Session II (August 2 – August 27, 2010)**

FINANCIAL INFORMATION

$100 Registration and Diagnostic Testing due with this application.

$395 Tuition per session payable before the first class.

_____ Date _____
(Signature of Father/Guardian)

_____ Date _____
(Signature of Mother/Guardian)

"Hope Christian Academy accepts students without regard to race, color, sex, or national or ethnic origin who are willing to abide by its principles and objectives."