

Pathway Christian School
5764 Hwy 1 SW
Kalona, IA 52247
2024-25

Application for Enrollment-New Families

For 2024-25 school year

Father's Name _____	
Last	First
<u>Contact Info</u>	
Home#: _____	Work#: _____
Cell#: _____	Email: _____
Is this the primary contact? Y N	

Mother's Name _____	
Last	First
<u>Contact Info</u>	
Home#: _____	Work#: _____
Cell#: _____	Email: _____
Is this the primary contact? Y N	

Address: _____

Name of Emergency Contact: _____
Relationship to Student: _____
Phone Number: _____

Student's Name	Birth Date
_____	_____
_____	_____
_____	_____
_____	_____

Has your student/s ever been suspended or expelled from a school? _____

If yes, explain _____

Name and address of previous school if applicable: _____
