



STUDENT INFORMATION

Last Name First Name Middle Grade Male/Female

Date of Birth Race Parish/Church

Home District: Where the student would attend school if not enrolled at BRCS. Yes No
Military Family

Please list any allergies your child has. Please list any medications prescribed for your child.

Does the student receive any special services? Yes No Is there an active IEP/service plan for: Learning Disability Speech/Language

PARENT INFORMATION

Father's Name Father's Address

Father's Home Phone Father's Cell Phone Father's Work Phone

Father's Place of Employment Father's Email Address

Mother's Name Mother's Address

Mother's Home Phone Mother's Cell Phone Mother's Work Phone

Mother's Place of Employment Mother's Email Address

Please identify who the student lives with during the school year: Father Mother Stepfather Stepmother Other

EMERGENCY CONTACT INFORMATION

In the event of an emergency where a parent cannot be reached, please indicate a relative or friend that we can notify:

Emergency Contact Name Phone Number Relation to Student

NEW STUDENT INFORMATION

School records should be forwarded from current school. Proof of identity (birth certificate) and immunization records are required.

Please advise your home school district of your intention to enroll in a private school at least ten days prior to enrollment.

Name of last school attended

City, State Phone Number