



# THE OAKS SCHOOL

## Enrollment Form

*(Please complete one per child)*

School Year: \_\_\_\_\_ Public School District: \_\_\_\_\_

### I. To be completed by parent or guardian:

Student Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Grade: \_\_\_\_\_

Parent or Guardian: \_\_\_\_\_

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Date

### II. To be completed by church school administrator:

Church School: The Oaks School

Address: 2201 Executive Park Drive Phone: 334-703-4340

City: Opelika, Al 36801

Date of Student Enrollment: \_\_\_\_\_ for \_\_\_\_\_ school year.

\_\_\_\_\_  
Signature of Administrator

\_\_\_\_\_  
Date

### III. Consent for Notification of Student Withdrawal

I hereby give prior consent to the administrator of the above named private church school to notify the public school superintendent should the above named student cease attendance at said church school.

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Date