



**Christ Chapel Academy – Rising Kindergarten Summer Camp-2019**

13909 Smoketown Road, Woodbridge, VA 22192

703-670-3822, Fax 703-897-7905

**“God Always Wins!”**

**2019 RISING KINDERGARTEN SUMMER CAMP  
REGISTRATION FORM**

**Student Information**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

Birthday \_\_\_\_/\_\_\_\_/\_\_\_\_ Age \_\_\_\_ Race \_\_\_\_\_ Gender \_\_\_\_\_

Parent’s Primary Email Address \_\_\_\_\_

**Family Information**

**Father’s** Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

Relationship to Student Father \_\_\_ Step-Father \_\_\_ Guardian \_\_\_ Lives with Student? Yes \_\_\_ No \_\_\_

Street Address \_\_\_\_\_ PO Box \_\_\_\_\_

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

County \_\_\_\_\_ Country \_\_\_\_\_ Church \_\_\_\_\_

Place of Employment \_\_\_\_\_ Position \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Email Address \_\_\_\_\_

**Mother’s** Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

Relationship to Student Mother \_\_\_ Step-Mother \_\_\_ Guardian \_\_\_ Lives with Student? Yes \_\_\_ No \_\_\_

Street Address \_\_\_\_\_ PO Box \_\_\_\_\_

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

County \_\_\_\_\_ Country \_\_\_\_\_ Church \_\_\_\_\_

Place of Employment \_\_\_\_\_ Position \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Christ Chapel Academy admits students of any race, color, national and ethnic origin to all rights, privileges, programs and activities generally accorded and made available to students of the school. It does not discriminate on the basis of race, color, national and ethnic origin in administration of its educational policies, admissions policies and other school-administered programs.