LIBERTY HILLS Academy

Registration
For Elective Classes

APPLICANT'S INFORMATION

F ☐
M ☐

Applicant's Full Name _____
last *first* *middle*

Preferred name _____ Birthdate ____/____/____ Age _____ Grade _____

Home Address _____ Phone _____
city *state* *zip*

FAMILY INFORMATION

Name of Father _____ Phone _____

Address _____

Father's Email Address _____ Cell Phone _____

Name of Mother _____ Phone _____

Address _____

Mother's Email Address _____ Cell Phone _____

CLASS SELECTIONS

Class Name	Day/Time	Cost

_____
Parent Signature

_____
Today's Date

Liberty Hills Academy does not discriminate against any employee, student, employee applicant, or student applicant because of race, creed, color, religion, sex, age, national origin, physical and/or mental disability. Liberty Hills Academy adheres to this non-discrimination policy with respect to all of its policies and programs, including educational programs, employment and admission programs, and all other school-administered programs.