

# Application for Enrollment



## Student Information

Entering Grade: Y5 K 1 2 3 4 5 6

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Birthday: \_\_\_\_\_ Gender: Male Female

## Parent/Guardian Information

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_

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

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

Home Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Child Residency Status: Full-time Part-time Does not reside with this parent/guardian

## Parent/Guardian Information

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_

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

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

Home Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Child Residency Status: Full-time Part-time Does not reside with this parent/guardian

## Enrollment Priorities

Does the applying student have any siblings enrolled in Abney? Yes No

Please return this form to:

Elementary school campus  
1435 Fulton Street East  
Grand Rapids, MI 49503

By Email: [padams@thewcaa.org](mailto:padams@thewcaa.org)