

I / We wish to enroll the following student(s) at SFC for the 2011-12 school year:

Student (1) Name	Grade	Male	Female
Student (2) Name	Grade	Male	Female
Student (3) Name	Grade	Male	Female
Student (4) Name	Grade	Male	Female
Student (5) Name	Grade	Male	Female
Student (6) Name	Grade	Male	Female

Father's (or Guardian's) Last Name	First	
Street Address	Home Telephone ()	
City	State	Zip
Occupation/Title	E-Mail	
Employer	Business Telephone ()	Cell Phone

Mother's (or Guardian's) Last Name	First	
Street Address	Home Telephone ()	
City	State	Zip
Occupation/Title	E-Mail	
Employer	Business Telephone ()	Cell Phone

Date: _____ Parent/Guardian Signature: _____

A \$60 per student non-refundable registration fee must accompany Student Registration by March 18.

After March 18, the registration fee increases to \$90 per student (for returning students).

Families on a Church Payment Plan must submit the \$60 per student registration fee directly to SFC.

Course Request Forms will not be accepted without this Student Registration and the appropriate fee(s).