Conowingo – Rising Sun Christian School
2012-2013 Application to the Homeschooling Program

Parents Names: _____ _____

Mailing Address: _____
Street City State Zip Code

Phone: (____)_____ **Additional Phone: :** (____)_____

Fax: (____)_____ **E-mail Address:** _____

Home Church: _____ **County of Residence:** _____

- **Please file an *Assurance of Consent Form* with your local Board of Education after you have received confirmation of enrollment from Conowingo – Rising Sun Christian School.**

  Have you ever been a member of Conowingo – Rising Sun Christian School or Churchville - Rising Sun Christian School?

  Yes θ **No** θ **(If yes, please transfer my records from Churchville Christian School to Conowingo-Rising Sun Christian School)**

- **Are you a member of the Home School Legal Defense Association? Yes** θ **No** θ

- **How long have you been homeschooling?** _____

- **Please describe the program you intend to use: A prepared curriculum** θ **Design our own curriculum** θ **Unschoolers** θ

Student Information

Full Name	Social Security # (Optional)	Date of Birth	Grade	Gender (M/F)

Only list those children who are being homeschooled. Use reverse side of this application if necessary.

Confirmation of Application

In making application to Conowingo – Rising Sun Christian School, we acknowledge that we have read, and agree to abide by, the school's policies.

_____ _____
Signature of the Father Signature of the Mother

New Enrollment Fee

New Enrollment Fee $75.00 due with application. (Please make checks payable to Conowingo - Rising Sun Christian School (or CRSCS) and mail to Conowingo – Rising Sun Christian School, P.O. Box 36, Conowingo, Maryland, 21918)

FOR OFFICE USE ONLY:
Pre-Enrollment Conference: _____
Group: _____ID Number:_____