

Covington Christian School  
 "Where Children Learn Truth"  
 Returning Student Registration Form

Student Name:	Entering Grade:
<ul style="list-style-type: none"> <li>• For K4, K5 (circle one)    Full Day                      Half Day</li> </ul>	

**Parent/Guardian Information**

Father:	Mother:	
Father Phone:	Mother Phone:	
Father Work Phone:	Mother Work Phone:	
Father Email:	Mother Email:	
Home Address:		
City:	State:	Zip:

**Emergency Contact Information**

Name/Relationship to Student	Phone Number

**Financial Information**

Preferred Payment Method:	<input type="checkbox"/> One Payment <input type="checkbox"/> Two Payments <input type="checkbox"/> 10 Monthly Payments <input type="checkbox"/> Other _____
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Are you applying for any of the following scholarships? <i>Please note: you must submit your most recently filed IRS 1040 Form if you are applying for tuition assistance.</i>	<input type="checkbox"/> Choice Scholarship <input type="checkbox"/> Scholarship Granting Organization (SGO) <input type="checkbox"/> CCS Scholarship
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Submit completed application and accompanying documents to:  
 Covington Christian School  
 PO Box 267  
 Covington, IN 47932

Office Use Only:	
<input type="checkbox"/> Registration Fees Paid _____	<input type="checkbox"/> Proof of Income Forms _____
<input type="checkbox"/> Book Fees Paid _____	<input type="checkbox"/> Immunization Records _____

*Covington Christian School admits students of any race, color, national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national and ethnic origin in administration of its educational policies, admissions policies, scholarship and loan programs, and athletic and other school-administered programs.*