

Holy Trinity Episcopal Day School

100 Church Drive

Auburn, Alabama 36830

334-821-9838

www.holytrinitydayschool.info

dayschool@holytrinitychurch.info

Office use:

Date Received: _____

Mem/Sib/Child: _____

Accept letter sent: _____

Accept letter rec'd: _____

Fee Paid: _____

Application Form

*Non-Refundable Application Fee: \$25.00.

This fee must be paid prior to consideration of your child for enrollment. This **does not** guarantee your child's acceptance

*Please advise us if any contact information changes, particularly the e-mail address.

The school is not responsible for lack of updated information.

School Year of Interest: _____ **Pre-K** _____ **or** **K** _____

Child's Given Name: _____

Name child is called: _____

Child's Birth date: _____ Male _____ Female _____

Your relationship to applicant: Parent _____ Grandparent _____ Other: _____

Name: _____

Home Phone: _____ Cell Phone: _____

Home Street Address: _____

City, State, Zip Code: _____

E-mail Address: _____

Mother or Legal Guardian's Name: _____

Relationship to child if not mother: _____

Mother's Place of Work: _____ Phone: _____

Father or Legal Guardian's Name: _____

Relationship to child if not father: _____

Father's Place of Work: _____ Phone: _____

Are you a member of Holy Trinity Church? Yes _____ No _____

Have any members of your family attended Holy Trinity Day School? Yes _____ No _____

If yes, please give name, relationship, and year (s) attended: _____

You may complete this form online and email it to dayschool@holytrinitychurch.info or you may print and mail it to: Holy Trinity Day School, Attn: Registrar, 100 Church Dr., Auburn, AL 36830.

Revised 3/12/2013