

# Native American Christian Academy

P O Box 4013, Sun Valley, AZ 86029-4013 (928) 524-6211

## Student Application

(1<sup>st</sup>-8<sup>th</sup> Grades)

Grade applying for: \_\_\_\_\_ Date: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Sex: \_\_\_M\_\_\_F Tribe: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Tribal # \_\_\_\_\_

Student Name: \_\_\_\_\_  
Last First Middle

Student Address: \_\_\_\_\_  
House Number and Street Address

City State Zip Code

Student Mailing Address: \_\_\_\_\_  
(IF DIFFERENT) PO Box and or House Number and Street Address

.....  
Father/Guardian: \_\_\_\_\_  
(Circle One) Last First Middle Initial

Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
(If DIFFERENT from student)

Employer: \_\_\_\_\_ Job Title: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

.....  
Mother/Guardian: \_\_\_\_\_  
(Circle One) Last First Middle Initial

Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
(If DIFFERENT from student)

Employer: \_\_\_\_\_ Job Title: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

.....  
**ACTIVITY AND FIELD TRIP PERMISSION**

This is to certify that my child (ren) listed below have my permission to travel with an authorized staff person on any authorized school trip or to participate in any authorized activity at or away from the school campus while enrolled. This may include academic, athletic, recreational, promotional, or any other activities on or off campus. I understand this is a part of my child's educational experience at Native American Christian Academy. I understand that an authorized staff person will be in charge and grant to him/her the privilege of making necessary decisions on my behalf concerning my child (ren). In case of accident and/or injury I will not hold the authorized staff person, those adults accompanying him/her, or Native American Christian Academy Administration responsible except for negligence.

\_\_\_\_\_ YES \_\_\_\_\_ Initial

**RELEASE**

I do hereby give Native American Christian Academy the right to use the name, picture, photograph of, or original creation by any of my children listed below in all forms of media and in all manners of advertising, trade, or any lawful purpose. I do also hereby give permission for Native American Christian Academy to provide financial information with outside parties for the purpose of acquiring activities, scholarships, etc for my student. I have read this release and am fully familiar with its contents.

\_\_\_\_\_ YES \_\_\_\_\_ Initial

**ATHLETIC LIABILITY RELEASE FORM**

I give permission for my child/children to participate in the athletic/sports programs offered by Native American Christian Academy. I agree not to hold the School liable for any injury received by the child while participating in the sports program.

\_\_\_\_\_ YES \_\_\_\_\_ Initial

**PARENTAL UNDERSTANDING OF NACA STATEMENT OF FAITH**

I have read and understand the Statement of Faith of Native American Christian Academy, and agree to them without reservation, and agree that my child will abide by these doctrines in all aspects of their life, both at and away from school functions.

\_\_\_\_\_ YES \_\_\_\_\_ Initial

.....

I have read (or had read to me), understand and agree with the Student Handbook. I will abide by these rules and guidelines.

\_\_\_\_\_  
Student Signature

.....

**PARENT/GUARDIAN HANDBOOK SIGN-OFF**

I have read and discussed with my child (ren), and agree with the Student Handbook. I will help and encourage my child to abide by these rules and guidelines.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date Signed

.....

**STUDENT LIFE POLICY STATEMENT**

*Student and Parent Handbook on Page 13*

Native American Christian Academy’s Biblical role is to work in conjunction with the home to mold students to be Christ-like. Of necessity, this involves the school’s understanding and belief of what qualities or characteristics exemplify a Christ-like life. The school reserves the right, within its sole discretion, to refuse admission of an applicant or to discontinue enrollment activities of the student are counter to or in opposition to the biblical lifestyle supporting, or condoning sexual immorality, homosexual activity, or bisexual activity; promoting such practices; or being unable to support the moral principles and beliefs of the school. (see Leviticus 20:13 and Romans 1:27)

I am aware of the above Student Life Policy and I am willing to comply.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date Signed