

Seventh-day Adventist School
(603) 394-9970

285 Main Ave., Rt. 107A
South Hampton, NH 03827

Application Form

Student's Name _____
Entering Grade _____ Date _____

Date of Birth _____ Age _____
Place of Birth _____
Social Security Number _____

Physician's Name _____
Physician's Address _____
Office Phone _____

Father's Name _____
Address _____
Cell number _____
E-mail _____
Occupation _____

Mother's Name _____
Address _____
Cell number _____
E-mail _____
Occupation _____

Church Affiliation _____
Church Address _____

Previous School Attended _____
School Address _____
School Phone _____
Grade Completed _____

Reference:
Name & Phone _____