



HOUSE OF THE LORD  
**CHRISTIAN ACADEMY**

New Family Interview Form

Date: \_\_\_\_\_

Parent Name(s): \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
Street City State Zip

Telephone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Home Church: \_\_\_\_\_

Pastor's Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

\*Personal Reference: \_\_\_\_\_ Telephone: \_\_\_\_\_  
(Pastor, Teacher, Administrator, Counsellor, etc.)

<u>Child's Name</u>	<u>Entering Grade</u>	<u>Age:</u>	<u>Birthdate:</u>
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*This Christian ministry does not discriminate on the basis of race, color, or national or ethnic origin in the administration of its educational policies, scholarship programs, and athletic or other school administered programs.