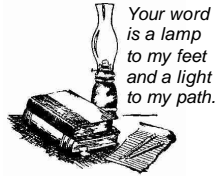


**Milford Christian Academy
Parent Directed Education**

273 Elm Street, Milford, NH 03055
Phone 603-673-9324, fax 603-672-4539
info@milfordchristianacademy.org



Member, Association of Christian Schools International
Pastor Kyn Gdanian, School Chaplain
Paul Sontag, School Principal
Angela Lehoux, Elementary Dept Head

Learning to live for something greater!

**PDE Family Enrollment Commitment Form
School Year 2008-2009**

MAKE CHECKS PAYABLE TO: Milford Christian Academy

Parent Directed Day School Enrollment Fee: \$100.00 per family (non-refundable)

******After March 31st, Enrollment Fee goes up to \$150 per family.******

Please select which program you are interested in: 5 days 2 days

Individual Programs Enrollment Fee: \$25.00 per student

PBL only Per Course ...and / or...

Other (PE, Art, Music, After School Activity): _____

STUDENT #1: _____
Please Print Name

DATE OF BIRTH _____ GRADE Entering: _____ S.S. #: _____

STUDENT #2: _____
Please Print Name

DATE OF BIRTH _____ GRADE Entering: _____ S.S. #: _____

STUDENT #3: _____
Please Print Name

DATE OF BIRTH _____ GRADE Entering: _____ S.S. #: _____

PARENT / GUARDIAN NAME(S): _____
MAILING ADDRESS: _____
CITY: _____ **STATE:** _____ **ZIP:** _____
TELEPHONE: _____ **EMAIL:** _____

This is a notice of intent to enroll your child in the new parent directed educational plan which will be created by you and the other families who enroll in this program.

Acceptance will be determined after a family interview, all necessary records have been viewed, and testing has been completed.

PARENT / GUARDIAN SIGNATURE PARENT / GUARDIAN PRINT

Today's DATE: _____