

New Life Christian Academy
5517 Griswold Road
Kimball, MI 48074
(810) 367-3770

Application for Guest at School Activity

Activity/Place _____ Date _____

Guest Student _____ Guest of _____
(grade)

Guest Address _____

Guest Home Phone _____ Guest Emergency Phone _____

School Guest is Attending _____

Parent Section:

I understand that my son/daughter is a guest at this New Life Christian Academy event and as such, will follow all NLCA school rules which are in effect whether or not the event is held on school property. I understand that once the guest leaves the event, he/she will not be allowed to return. I also understand any issues involving substance abuse could involve police action and/or parent notification. Students or guests who do not comply with these rules or the directives of an Event Supervisor may be removed and subject to further disciplinary action. New Life Christian Academy will assume no legal responsibility for non-attending guests.

Parent Signature _____

Guest Signature _____

NOTE: All guests will be expected to present a photo I.D. upon admission.

Administrator Section: To be completed by guest student's school administrator.

Please verify that the above named student is enrolled in your school and is a member in good standing.

Administrator's Signature _____ Title _____

Date _____ School Phone Number _____