

**RE-ENROLLMENT FORMS  
2015/2016**

PLEASE COMPLETE AND RETURN BY March 27, 2015

**Our family will not be returning to DCS because**

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**Our family will be returning to DCS.**

**STUDENT INFORMATION**

Student #1 First Name: _____ Last Name: _____ Entering Grade: _____	Student #2 First Name: _____ Last Name: _____ Entering Grade: _____
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Student #3 First Name: _____ Last Name: _____ Entering Grade: _____	Student #4 First Name: _____ Last Name: _____ Entering Grade: _____
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**Billing Email** \_\_\_\_\_

**Church Affiliation** \_\_\_\_\_

**Pastor's Name** \_\_\_\_\_

**PARENT'S SIGNATURE** \_\_\_\_\_

## FAMILY INFORMATION

**Filling out this information is only required if any information has changed.**

<p>Family Member #1 - Husband</p> <p>Relation _____ Title _____</p> <p>First Name _____ MI: _____</p> <p>Last Name _____</p> <p>Work Phone: _____</p> <p>Occupation: _____</p> <p>Employer: _____</p> <p>Home Address: _____</p> <p>P.O. Box: _____</p> <p>Zip: _____ State: OH</p> <p>City: _____ Country: USA</p> <p>Home Phone: _____</p> <p>Cell Phone: _____</p> <p>E-Mail: _____</p>	<p>Family Member #2 - Wife</p> <p>Relation _____ Title _____</p> <p>First Name _____ MI: _____</p> <p>Last Name _____</p> <p>Work Phone: _____</p> <p>Occupation: _____</p> <p>Employer: _____</p> <p>Home Address: _____</p> <p>P.O. Box: _____</p> <p>Zip: _____ State: OH</p> <p>City: _____ Country: USA</p> <p>Home Phone: _____</p> <p>Cell Phone: _____</p> <p>E-Mail: _____</p>
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