



APPLICATION FOR REGISTRATION

DATE RECEIVED: _____

PLEASE COMPLETE THE FOLLOWING:

HOMESCHOOL NAMES:

To avoid duplication of names, kindly submit three completely different names for your homeschool in order of preference. *(Please do not use the word 'Academy' in your homeschool name, and limit the length of the names to 15 characters.)*

A.

B.

C.

HOMESCHOOL PHYSICAL ADDRESS:

Address :

City :

Province :

Country :

Postal Code :

HOMESCHOOL POSTAL ADDRESS:

Address :

City :

Province :

Country :

Postal Code :

Contact Person :

Telephone :

Contact Phone No. :

E-mail Address :

FULL NAME OF FATHER:

First Name

Middle Name

Surname

FULL NAME OF MOTHER:

First Name

Middle Name

Surname

Below, please fill in the names, ages and grade levels of your children who will be using the A.C.E. Programme:

NAME	DATE OF BIRTH	AGE	GRADE	NAME OF LAST SCHOOL ATTENDED
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

IF THE LAST SCHOOL ATTENDED WAS A SCHOOL USING THE A.C.E. PROGRAMME, KINDLY PROVIDE THE FOLLOWED INFORMATION:

Reason for leaving the school?

Are there any fees outstanding to the school?

WE ARE INTERESTED IN HOME-EDUCATING OUR CHILDREN ON THE A.C.E. PROGRAMME BECAUSE:

PLEASE COMPLETE THE FOLLOWING: Indicate

where you heard about A.C.E. is missing.

- | | | |
|--|--|---|
| <input type="checkbox"/> Internet | <input type="checkbox"/> Joy Magazine | <input type="checkbox"/> A.C.E. Employee |
| <input type="checkbox"/> Website (SA) | <input type="checkbox"/> YOU Magazine | <input type="checkbox"/> Nearby A.C.E. School |
| <input type="checkbox"/> Website (USA) | <input type="checkbox"/> Friend / Family | <input type="checkbox"/> Home School Expo |

FATHER'S
SIGNATURE

MOTHER'S
SIGNATURE

DATE