



1626 Valley High Avenue
Thousand Oaks, CA 95062
Phone: (805) 870-5110

*Stand fast therefore in the liberty by which Christ has made us free... Gal.5:1
For you, brethren, have been called to liberty; only do not use liberty as an opportunity for the flesh,
but through love serve one another. Gal. 5:13*

MEMBERSHIP APPLICATION

Dear Applicant:

Thank you for expressing an interest in enrolling in Liberty Christian Academy. Please fill out the following application and return promptly. A non-refundable processing fee of **\$5.00** must be sent with this application. When completed, mail to the above address.

Date of Application: _____ For School Year: _____ - _____

PARENT INFORMATION

Name of Parents: _____
Last Name, Father - Mother

Address: _____
Number and Street

City/State/Zip: _____ Home Phone: _____

Contact Information - Father

Cell Phone: _____ E-Mail: _____

Place of Employment: _____

Contact Information - Mother

Cell Phone: _____ E-Mail: _____

Place of Employment: _____

Parents' Educational Background:

(ND : No Diploma, AD : Associate Degree, BS : Bachelor's, MS : Master's, Other : Fill-in)

Father: _____ Mother: _____

Marital Status: Married: _____ Divorced: _____ Widowed: _____ Single: _____

If biological parents do not live at the same address, please list information of parent not living with child:

Name: _____ Phone: _____

Address, City, State and Zip



Is this parent in agreement about homeschooling the children? YES NO

Explain, if necessary: _____

CHILDREN INFORMATION (Please list all children living in your home)

First/Last Name	Sex	Birthdate	Age	Grade (In Fall)	Enrolling in LCA? (Yes or No)
_____	_____	_____	_____	_____	<input type="checkbox"/> YES <input type="checkbox"/> NO
_____	_____	_____	_____	_____	<input type="checkbox"/> YES <input type="checkbox"/> NO
_____	_____	_____	_____	_____	<input type="checkbox"/> YES <input type="checkbox"/> NO
_____	_____	_____	_____	_____	<input type="checkbox"/> YES <input type="checkbox"/> NO
_____	_____	_____	_____	_____	<input type="checkbox"/> YES <input type="checkbox"/> NO
_____	_____	_____	_____	_____	<input type="checkbox"/> YES <input type="checkbox"/> NO
_____	_____	_____	_____	_____	<input type="checkbox"/> YES <input type="checkbox"/> NO

FAMILY INFORMATION

Do you attend church? _____ If so, do you attend regularly? _____

Name of Church (if applicable): _____

Are you currently educating your children at home? _____ Number of Years: _____

Who will be responsible for educating the children? _____

Are you currently enrolled in an ISP / Support Group? YES NO

If yes, please provide the Group Name, Contact Name and Telephone Number:

Reason for Enrollment Transfer: _____



Has any legal action been threatened or brought against your home school or anyone associated with it, or have you contacted or been contacted by any school district official, social worker, or other government official concerning your children, your home school, or absence from public school? YES NO

If yes, please explain: _____

Have you been investigated, charged, or convicted of child abuse, neglect, endangerment or any other related charge within the past 5 years? YES NO

If yes, please explain: _____

Please list below any skills, talents or abilities that you would consider using to benefit our school and/or students at some time. List any or all family members that apply. This does not in any way obligate you to volunteer.

Name	Skill / Talent / Abilities
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

REQUIRED INFORMATION:

Referred By: _____ Telephone: _____

How did you find out about our school?

(Check if applicable)

Personal Referral (list above) LCA Website Other Website Other

Please Specify: _____



IMPORTANT: Two personal letters of reference must be submitted along with this application in order to be considered for membership -- preferably from an LCA member, pastor, former ISP / Support group leader or long-standing friend (at least 5 years). You may send the reference letters with your completed application. Alternately, the personal references may be emailed to the school at: mail@libertyacademy.net. Your application will not be processed until we receive the required references.

Liberty Christian Academy REQUIRES membership in **Home School Legal Defense Association** for all enrollees. To be eligible for HSLDA membership, parents or legal guardians must personally do at least 51% of the home schooling.

Are you currently an HSLDA member? YES NO

Member Number: _____ Renewal Date: _____

BY SIGNING THIS APPLICATION, WE AGREE:

1. To apply for membership in HSLDA.
2. That all information presented on this form, to the best of our knowledge, is true and accurate.

Signature / Date

Signature / Date

Date Sent Out: _____ Sent By: _____ Received By: _____ Date: _____