



School Contact Information

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2018-2019 STUDENT APPLICATION

STUDENT INFORMATION

_____ 11 or _____ 12
Last Name First Name Date of Birth Grade (check one)

Current School

_____ Student Phone Number _____ Student Email Address

PARENT/LEGAL GUARDIAN INFORMATION

Parent/Guardian Name(s)

Mailing Address

_____ Parent Phone number _____ Parent Email Address

SIBLING INFORMATION

List any additional siblings applying to MMC. NOTE: A separate application is required for each student.

_____ Parent/Legal Guardian Signature _____ Student's Signature _____ Date