

CHANGE OF ADDRESS FORM

Date Submitted: _____

If you move or change phone numbers, it is important that you notify Summit Christian School of the change immediately. Please use this form to update your information.

Please submit the following information and attach a copy of a complete utility bill with the new address.

Student's Name(s): _____	Grade(s): _____
Parent/Guardian's Name(s): _____	

<p>If you have changed your phone number, what is the new number?</p> <p>_____</p> <p>What number is no longer in service?</p> <p>_____</p>
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<p>If you have moved, what date did you move? _____</p> <p><u>Previous Address:</u></p> <p>_____</p> <table><tr><td>STREET ADDRESS</td><td>APT #</td><td>CITY</td><td>ZIP</td></tr></table> <p><u>New Address:</u></p> <p>_____</p> <table><tr><td>STREET ADDRESS</td><td>APT #</td><td>CITY</td><td>ZIP</td></tr></table>	STREET ADDRESS	APT #	CITY	ZIP	STREET ADDRESS	APT #	CITY	ZIP
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STREET ADDRESS	APT #	CITY	ZIP					

If your student rides the bus to or from school, you must also notify them of these changes.