

# APPLICATION FOR ADMISSION TO MOUNT SNOW ACADEMY

**PLEASE PRINT AND FILL IN THE FORM COMPLETELY!**

Name: _____	Today's Date:     /     /	<i>Please Circle:</i>
Address: _____	Applicant's Age: _____	Alpine
	Date of Birth:     /     /	Freestyle   Snowboard
Parents email _____	Graduating Class: _____	Male   Female

  

Mother: _____	(local)                      Mother's Phone
Primary Mailing Address: _____	(h)
	(o)
<i>if different from applicant's</i>	(cell)
	(fax or e-mail)

  

Father: _____	(local)                      Father's Phone <i>(if different from above)</i>
Primary Mailing Address: _____	(h)
	(o)
<i>(if different from applicant's)</i>	(cell)
	(fax or e-mail)

Current School: _____	Main Phone: _____
Address: _____	Fax: _____
	E-Mail: _____
Principal: _____	Principal's Phone: _____
Guidance Counselor: _____	Guidance Counselor's Phone: _____

Would you like to receive information about applying for financial aid?
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If accepted, will you matriculate as a boarding or commuter student?
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