





Last School Attended							
						Year:	
Student's Mailing Address					Email Address		
PERSONAL INFORMATION							
Date of Birth			Age	Place of Birth	Mobile #	Nationality	
Day	Month	Year					
Street	Town/City		Province	Country	Zip code	Email Address	
Father's Information							
Surname		First		M.I.	Email Address		Contact No.
Address				Date of Birth		Religion	
Mother's Information							
Maiden Name		First			M.I.		
GUARDIAN IN THE CITY							
Surname		First		M.I.	City Address		Contact No.
<div><div><input type="checkbox"/></div><div>PAYMENT METHOD</div></div> <div><div><input type="checkbox"/></div><div>Checks included (Please make your check payable to (MHAM CM.)</div></div> <div><div><input type="checkbox"/></div><div>Others please specify</div></div> <p>I HEREBY CERIFY THAT I WILL ABIDE BY THE RULES AND REGULATIONS OF THE SCHOOL AND THAT I WILL VOLUNTARILY BIND MYSELF TO PAY MY SCHOOL FEES AND OTHER OBLIGATIONS AS SCHEDULED AND THAT ALL OF THE INFORMATION CONTAINED IN THIS FORMS IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.</p> <div><div></div><div>STUDENTS SIGNATURE</div></div> <div><div></div><div>DATE</div></div>							

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