

Middle Kingdom Page School  
Enrollment Form

Student Mundane Name \_\_\_\_\_ Parent(s) Name \_\_\_\_\_

Student SCA Name (optional) \_\_\_\_\_ Parent SCA Name \_\_\_\_\_

Street Address \_\_\_\_\_ City, State Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ Local SCA Group \_\_\_\_\_

Birthdate \_\_\_\_\_ Date of enrollment \_\_\_\_\_

Has this student been involved in other Page Schools or Guilds? \_\_\_\_\_

If so, please specify (both type and location)

\_\_\_\_\_

Level attained in previous Page School/Guild \_\_\_\_\_

Tell us about the Page (interests, previous or current projects, experiences):

Please list any questions/suggestions/comments/concerns below:

Date received by Page School Staff: \_\_\_\_\_

Date confirmation of enrollment sent: \_\_\_\_\_