SHADOWING

at Cornerstone Christian Academy

We welcome students interested in attending Cornerstone Christian Academy to visit, or "Shadow."

To arrange a Shadow date:

1. Contact Jessica Wolfe, Admissions Coordinator, no less than one week prior to the date you would like to shadow: 309-662-9900 or Jessica.Wolfe@CornerstoneChristian.com.
2. Complete this form and bring it to the office, email it to Jessica Wolfe, or fax to 309-662-9904.

Requested Shadow date_____

_____ _____ _____

Name of Student Shadowing Grade School

_____ _____ _____

Name of Student Shadowing Grade School

Name/s of Parent/s _____

Address_____

Home phone_____ Cell phone_____

Email address _____

Emergency contact_____ Phone_____

Briefly explain why you would like your student to experience Cornerstone. _____

_____

_____

Are there classes or activities of particular interest?_____

_____

Is there a current CCA student that your child would like to shadow?_____

Please list any medical conditions or any other information that we should be aware of:

_____

_____

In the event a parent cannot be reached in an emergency, I/we hereby give a school official permission to take my/our child to the nearest hospital for treatment while attempting to reach parent. I/we agree to hold such person "harmless and free of any legal responsibility" of any claims, demands, or suit from damages arising from this action.

_____ _____

Parent/Guardian Signature Date

Approved by:

_____ _____

CCA Administration Date