

Life Christian Academy International SPONSOR APPLICATION

www.lifechristianacademy.ca

DA	TE:	_		
Α	PLEASE PRINT			
П	FULL SPONSOR NAME:			
III.S	FULLADDRESS:			
			POSTAL CODE:	
IS	PHONE #:		FAX #:	
SPONSOR DETAILS				
S	AUTHORIZED SIGNATURE		NAME & TITLE (please print)	6
В	PLEASE PRINT STUDENT SURNAME:			
DETAILS				
			PHONE #_	
밑	CITY:		POSTAL CODE:	
	STUDENT NUMBER			
STUDENT	OTOBERT HOMBER		MM DD YYY	
0)				
С	OTABT BATE		DUNITED ANGUNIT	
	— STAKT DATE		☐ LIMITED AMOUNT (please specify) ☐ FULL TUITION, STUDENT & ACTIVITY FEES	
P SPO	END DATE:		☐ STUDENT & ACTIVITY FEES	
	PROGRAM:		☐ APPLICATION PROCESSING FEE	
DURATION OF SPON-	COURSES:			
D	☐ SUPPLIES ONLY:		☐ OTHER - please list item(s) (ie, software)	
		\$		
ا ۾ ا	BOOKS ONLY: □ BOOKS	Ψ		
STOR	ଞ୍ଚ □ BOOKS ONLY: □ BOOKS & SUPPLIES:			
DOKSTOR	BOOKS ONLY: BOOKS & SUPPLIES: COMPLITER	\$		
BOOKSTOR	BOOKS ONLY: BOOKS & SUPPLIES: COMPUTER			
BOOKSTOR	BOOKS ONLY: BOOKS & SUPPLIES: COMPUTER	\$		
BOOKSTOR		\$ \$	anscripts	
	☐ Progress Report ☐ A	\$ttendance	anscripts	

For more detailed information regarding sponsor liability, refunds, and withdrawal policies, please contact Accounts Receivable department at 613-834-6588