

SUMMER 2024

SOUTHWESTERN ACADEMY

"Where You Belong"

2800 Monterey Road • San Marino, California 91108 • Phone: 626-799-5010

 $\bullet E\text{-Mail:}\ \underline{Admissions@SouthwesternAcademy.edu}$

Website: www.SouthwesternAcademy.edu

L.A. Experience: \$9,100.00 Boarding | \$4,130.00 Day

Registration Information	(Please print)		
STUDENT #	LAST NAME:	FIRST NAME:	NICKNAME:
GENDER: ☐ Male ☐ Female	DOB:	COUNTRY OF CITIZENSHIP:	GRADE LEVEL fOR 2024:
re there any restrictions of any	kind in regard to school sports or	other activites? □ Yes □ No If y	ves, please explain:
oes your student have any aller	rgies or intolerance to medication	, and/or any dietary restrictions? ☐ Yes	s □ No
yes, please explain:			
information About (check one):		Information About (check one):	
□ Father □ Stepfather		□ Mother □ Stepmother	
irst Name Middle Name Family/Last Name		First Name Middle Name Family/Last Name	
-Mail Address		E-Mail Address	
treet Address		Street Address	
ity, State/Province, Country		City, State/Province, Country	
ip/Postal Code		Zip/Postal Code	
Home and/or Cell Telephone (inc. area/country code)		Home and/or Cell Telephone (inc. area/country code)	
Parent Signature:		Parent Signature:	
o you read English? □ Yes □ No		Do you read English? □ Yes □ No	
If parent(s) cannot be rea	ached, please indicate persons	s authorized to contact in case of a	in emergency:
1. Name:		Relationship:	
Address:			
Street Address Area Code/Phone Numbe	City State/Province	Country Zip/Postal C	
2. Name:		Relationship:	
Address:			
Street Address City St	ate/Province Country	Zip/Postal Code	
Area Code/Phone Numbe	r:	E-Mail:	