



Admission Application 2021

PERSONAL DATA

Legal Name: _____ Gender _____
First {Given} Middle Last {Family} Nickname

Mailing Address: _____
Street Name and Number and/or PO Box

City State County Zip Code

Attach
personal
photo

Contact Phone: _____ Student Email Address: _____

Date of Birth (mm/dd/yyyy) _____ State of Maine resident? Yes No

School presently attending: _____ School Phone: _____

School address: _____

Current Grade: __ Year of High School Graduation: ____ How did you first hear about MSSM?

Have you attended MSSM Summer Camp? Yes No If yes, years attended _____

Do you have any special dietary, physical or emotional needs? Yes, please explain No

FAMILY DATA

Mr. Mrs. Ms. Parent Name: _____ Mr. Mrs. Ms. Parent Name: _____

Parent's Occupation: _____ Parent's Occupation: _____

Physical Address: _____ Physical Address: _____

Contact Phone: _____ Contact Phone: _____

Alternate Phone: _____ Alternate Phone: _____

Email: _____ Email: _____

Parents Married Parents Separated Parents Divorced Father Deceased Mother Deceased Other

