Holly Grove Christian School 7317 Mennonite Church Road Westover, MD 21871 410 – 957 – 0222 410 – 957 – 4250 fax www.hgcsweb.com

Student Records Request

To: School	
Address	
City, State, Zip	
Phone #	
Fax #	_
To Whom It May Concern:	
has been accepted	d to our school. We would appreciate it if you
could fax or mail over their records at you	r earliest convenience. Thank you.
Sincerely,	
Michael A. Rohrer	
Administrator	
Parent Permiss	ion / Waive Statement
<u> </u>	nation pertinent to complete the application ent or school from liability or damage which
I further certify that I have carefully re	ead and do understand the above statements.
Signature of Parent / Guardian	Date
Signature of Parent / Guardian	Date