



# CHESTERTON ACADEMY

---

## OF ST. MICHAEL

### Shadow Student Interest Form

Student Name:

Student Grade:

Parent's Name(s):

Phone number:

Interested: \_\_\_current year transfer OR \_\_\_next year

Briefly describe your interest in Chesterton Academy of St. Michael:

#### Schedule for the Day:

- Drop-off at 7:30 AM in the front
  - Your child's Chesterton Ambassador will meet your child outside the doors, where they will take them inside and introduce the Shadow Student to the faculty.
- 1st period → Mass → Periods 2-4 → Lunch & Lyceum → Periods 5-7
- Pickup at 2:40 PM

#### Other Pertinent Information:

- Chesterton students are dressed in uniform each day. I would suggest Shadow students come dressed like they would to Mass.
- Please bring a pencil or pen, lunch and water bottle if desired. All other materials will be provided.
- Address: 12034 115th Ave NE, Kirkland, WA 98034
- Office Number: 425-791-2718

---

**To Be Filled Out By Office Manager or Headmaster**

---

Student Approved By:

Date:

Date for Shadow Student to Attend:

Transportation Form: (Y/N)

# Transportation Form

---

**Passenger Waiver of Liability:**

I recognize and acknowledge that I am voluntarily traveling as a passenger in a van owned by Trellis Church and leased with our own insurance by Chesterton Academy of Saint Michael to and from Mass at Holy Family Catholic Church, Kirkland, WA. I assume all risks associated with this travel and agree to absolve, exonerate, and hold harmless the Chesterton Academy of Saint Michael institution and employees from liability for any harm or injury resulting from this travel.

Passenger Signature: \_\_\_\_\_

Date: \_\_\_\_\_

I recognize and acknowledge that I voluntarily authorize my child to travel to and from the above named Mass in the van leased by Chesterton Academy of Saint Michael. I assume all risks associated with this travel and agree to absolve, exonerate, and hold harmless the Chesterton Academy of Saint Michael institution and employees from liability for any harm or injury resulting from this travel. These risks include, but are not limited to any and all injuries to my child and all property damage associated with this travel.

Parent Signature: \_\_\_\_\_

Date: \_\_\_\_\_