

**Martin Luther Academy**  
7112 N. Overland Street, Kansas City Missouri 64151  
(816) 734-1060      Email: school@mlakc.com

## RECORD RELEASE FORM

Please complete this form and return it to Martin Luther Academy with your registration materials. It will be sent to your child's school by the Martin Luther Academy office.

My child, \_\_\_\_\_ has applied for admission to grade \_\_\_\_\_ at Martin Luther Academy for the \_\_\_\_\_ school year.

I hereby request that the following information be sent to Martin Luther Academy:

- Health and/or Medical Records
- Academic Transcripts
- Standardized Test Scores
- Discipline Records
- Current Grades and Classroom Scores

Email or mail the information to the attention of:

Martin Luther Academy  
Office of Admissions  
7112 N. Overland Drive  
Kansas City, Missouri 64151  
(816) 734-1060      Email: school@mlakc.com

Name of Last School \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_

Thank you for your assistance!

\_\_\_\_\_  
Signature of Parent or Legal Guardian

\_\_\_\_\_  
Date