Westside Christian School

A Ministry of crossroads church

# SCHOOL YEAR 20 - 20

Class Applying For:  Preschool *Tue/Thu *Preschool *M/W/F * Kindergarten  Grade 1-12

# STUDENT INFORMATION

Full Name Age

Last First Middle

Birth Date Birthplace Gender

Address APT#

City ZIP Telephone

Last School Attended Last Grade Completed

# FAMILY INFORMATION

Father/Guardian Mother/Guardian

Name: Name:

Address: Address:

Employer: Employer:

Phone #’s-Home: Phone #’s-Home: Work: Work:

Cell: Cell:

Email: Email:

# HOME STATUS:

* Shared Parenting
* Parents Divorced
* Parents Separated
* Single
* Father Deceased
* Mother Deceased

# AUTHORIZATIONS

CUSTODIAL PARENT IS:

* Shared Parenting
* Father
* Mother
* Stepfather
* Stepmother
* Other-

**Emergency Contact** person if parent cannot be reached:

* 1. Name Phone

*Relationship to student*

* 1. Name Phone

*Relationship to student*

**Authorized** persons to pick up student (in addition to above):

1. Name Phone

*Relationship to student*

1. Name Phone

*Relationship to student*

# RELIGIOUS INFORMATION

**Church Attending**  **Since?**  Address Pastor Phone

Is the father of the applicant a Christian? YES NO

Is the mother of the applicant a Christian? YES NO

Has the applicant ever made a profession of faith in Jesus Christ? YES NO How long has the applicant been a Christian? Is the applicant’s attitude and behavior consistent with a Christian life? YES NO

# MEDICAL INFORMATION

Family Physician Phone

Does student have any **Allergies** or **Health problems** we need to know about? YES NO

\*If YES, please indicate:

 ***Arthritis *** ***Hearing *** ***Fractures *** ***Visual *** ***Other *** ***Asthma *** ***Heart *** ***Seizures *** ***Diabetes***

 ***Bladder *** ***Kidney *** ***Speech Bee Sting Allergy***

If checked, please describe:

Does student have any physical disabilities (please describe)

Is student taking any medications (please list and describe)

# SCHOLASTIC INFORMATION

Has student ever had disciplinary difficulty at school? YES NO

If yes, please explain:

**Please answer following questions if your student is entering grade 1 or higher.**

Has student ever been expelled, dismissed, suspended, or refused admission at another school? YES NO If yes, please explain:

Does student have a juvenile or arrest record? YES NO If yes, please explain:

Please indicate academic level of student’s previous work:

Excellent Good Average Poor

Has student ever failed a subject in school? YES NO If so, please explain:

Has student ever used tobacco, alcohol, or non-prescription drugs of any kind?

YES NO If so, please explain:

# OTHER INFORMATION

How did you hear about Westside Christian School? Friend Newspaper Walk-in WCS Employee

Has applicant been enrolled at WCS previously? YES NO

Reason for selecting this school:

# AGREEMENT

“I hereby pledge to pay my financial obligations to the school on the date due and understand that it may be necessary to withdraw my student if proper arrangements are not made on a past due account.”

“I appreciate the standards of the school and do not tolerate profanity, obscenity in word or action, dishonor to the Godhead and the Word of God, or disrespect to the personnel of the school. I agree to support all regulations of the school and authorize this school to employ discipline as it deems wise and expedient for the training of my student.”

“I understand that the school reserves the right to dismiss any student who fails to comply with the established guidelines set forth in the *Parent/Student Handbook*, or with the details of this agreement.”

**Father’s Signature Date**

**Mother’s Signature Date**

\***Student’s Signature Date**

\*A signature is required if student is entering grade 7 or higher.

\*The application must be filled out completely before it can be processed. The registration fee of $70.00 must accompany the application and is non-refundable.

An interview with the parents and the student will be required before final acceptance.

**Westside Christian School**

Financial Agreement & Signature Page (20 -20 School Year)

**Registration / Re-Enrollment Fees**

$70 Initial Registration Fee (per child; includes all testing; due upon acceptance)

$35 Re-Enrollment Fee (per child; due each spring)

**Tuition Fees**

* Tuition is billed over **10 months (August through May)**
* Students enrolling in or after August will be billed at the “Late Registration” rate (see below)
* **Discounts Available**
	+ **Multiple Children**-Oldest Child will pay full price, Second Child discounted up to 15%, Third and subsequent children discounted up to 25%
	+ **Early Payment-**Tuition will be discounted by 5% if paid in full by September 15th of the current school year

Monthly Tuition Breakdown:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **CLASS** | **1st Child** | **2nd Child** | **3rd Child** | **Late Reg** | **PER YEAR** |
| Preschool (Caterpillars) | $114 | $97 | $85.50 | $127 | **$1140** |
| Pre-Kindergarten (Butterflies) | $127 | $108 | $95.25 | $141 | **$1270** |
| Kindergarten | $246 | $209 | $184.50 | $273 | **$2460** |
| Elementary/Upper Learning Center (Gr 1-12) | $303 | $257.50 | $227.25 | $334 | **$3003** |

**Curriculum Fees** (Grades K-12)

Curriculum fees are in addition to tuition and will be billed at the beginning of each semester.

Grades K-5: PACE fee $225 annually

Based on 60 PACES per year. Will be billed at $112.50 per semester. Additional PACES completed will be billed at the rate of $3 per at the close of the school year.

Grades 6-12: UNIT fee $350 annually (computer license)

Unlimited UNITS per year. Will be billed at $175 per semester.

**Payment Policy**

* Payments are due on the 1st of each month (August – May)
* $25 Late fee applies to payments not made by the 5th of the month, unless arrangements have been made with the office.
* If a family’s account is 45 days past due, student/s will be suspended until satisfactory financial arrangements have been made with the Business Office.
* All accounts must be paid current before re-enrolling and must be paid in full before final report cards are issued at the end of the school year.

**Read and Sign the Following**

* We/I hereby commit to pay the financial obligations to the school by the appropriate due dates.
* We realize that Westside Christian School is a non-profit school, operated solely by the tuition and gifts of the interested parents and friends.
* We will abide by the policies and procedures outlined in the Parent/Student Handbook.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| *Father’s Signature* | *Date* |  | *Mother’s Signature* | *Date* |
| *Father’s Printed Name* |  |  | *Mother’s Printed Name* |  |

**Westside Christian School**

**Permission/Consent Form**

This is permission for my child to be cared for by Westside Christian School staff and for my child to use all of the play equipment and participate in all activities provided by Westside Christian School.

I hereby grant permission for my child to leave the premises under the supervision of a staff member for planned neighborhood walks or for announced field trips, which may require traveling in a vehicle.

I hereby release and hold harmless Westside Christian School, staff and agents from any loss or damage to toys, clothes, or other personal items or articles, and relieve them of all responsibility for accidents and injuries, claims, damages or other liabilities for injuries to or damage by my child both on and off the premises which are not a result of negligence by Westside Christian School, staff or agents.

I understand that photographs, videos taken of me and/or my child while in the care of Westside Christian School may be used for promotional, or publicity purposes such as in the local newspaper and/or brochures.

I hereby grant permission for Westside Christian School to take whatever steps may be necessary to obtain emergency medical care if warranted: 1. Attempt to contact parent

2. Attempt to contact child’s physician 3. Attempt to contact the emergency contact persons listed on the registration form 4. Dial 911 for emergency help.

I authorize Westside Christian School to take whatever emergency measures (first aid, disaster evacuation or drills for same, 911 emergency) are judged necessary for the care and protection of my child. If the situation warrants, I consent to have my child transported and treated by a physician/hospital at my expense. I will assume full financial responsibility for medical services deemed necessary at that time.

I have received Westside Christian School Parent/Student Handbook, a copy of the dress code, and I have read, understand and agree with school policy. I have read, agree, and signed the Westside Christian School Permission/Consent form.

Date:

Parent/Guardian:

Signature: