

STUDENT INFORMATION

Name _____
 (Last) (First) (Middle) (Preferred First Name)

(Birthdate) (Age) (Sex) (Current Grade)

Address _____
 (Number/Street) (Apartment)

(City) (State) (Zipcode) (Home Phone)

FAMILY INFORMATION

Father _____
 (Name) (Employer) (Work Phone)

Mother _____
 (Name) (Employer) (Work Phone)

Status _____
 (Married) (Widowed) (Separated) (Divorced) (Single)

SCHOLASTIC INFORMATION

Former School _____

Address _____
 (Street) (City) (State) (Zipcode)

Previous academic performance _____
 (Excellent) (Good) (Average) (Below average) (Poor)

Has student ever failed a grade? _____
 (If yes, explain)

Has student ever been expelled, dismissed, suspended, or refused admission to another school?

 (If yes, explain)

Explain any disciplinary difficulties _____

Has student ever been arrested, or ever been in trouble with the law?

 (If yes, explain)

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

 (If yes, explain)

MEDICAL INFORMATION

Family Physician _____
 (Phone)

Dentist _____
 (Phone)

Physical limitations or allergies _____

Responsible adult(s) to contact if parents cannot be reached

 (Phone)

 (Phone)

EMERGENCY MEDICAL PERMISSION

I hereby authorize the teachers, secretary, pastor, or coaches of College Lakes Christian Academy to seek emergency medical care for my child, _____, and to authorize whatever physician, clinic, or hospital they may choose to provide emergency care for my child if I cannot be contacted immediately.

(Parent Signature)

(Date)

GENERAL INFORMATION

Church now attending _____

How did you find out about this school? _____

Why did you select this school? _____

STATEMENT OF COOPERATION

1. In making application for my child, it is my desire for him/her to complete the 20__ — 20__ school year.
2. I understand that the book fee is a user’s fee for the school year the student is enrolled in College Lakes Christian Academy and is not to be considered a purchase of books or PACEs. I further understand the policy of the school is to make no refunds on tuition, book fees, and registration fees.
3. I give permission for my child to take part in all school activities including sports and school-sponsored trips away from school premises, and absolve the school from any liability to me or my child for any injury at school or during any school activity.
4. I understand College Lakes Christian Academy exists as an alternative to the government school system.
5. I understand that the principal determines the meaning and application of all policies.
6. I understand and agree that the education of my child will be guided by the instructors and other school officials. I agree that my purpose in obtaining a Christian education for my child will be achieved by following the curriculum set by the instructors. To that end, I agree that I will require my child to perform all duties and responsibilities entrusted to him by the instructors or school officials to the best of his ability to their satisfaction. I understand and agree that during my child’s enrollment the courses offered and the instructors teaching them may change from time to time in the discretion of the school leadership.

A BASIC UNDERSTANDING:

It is understood that attendance at College Lakes Christian Academy is not a right but a privilege which may be forfeited by any student who does not conform to the standards and regulations of the institution. The Academy may request the withdrawal of any student at any time, who, in the opinion of the principal, does not fit into the spirit of the institution, regardless of whether or not he conforms to the specific rules and regulations of the Academy.

STUDENT HANDBOOK

I have carefully read the student handbook, and agree that my child and I will conform to the rules, policies, spirit, and philosophy of College Lakes Christian Academy. I further understand and agree that this is a legal binding agreement I will not contest.

I expressly agree that this release, waiver, and indemnity agreement is intended to be broad and inclusive as permitted by the laws of the State of North Carolina, and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect. This release contains the entire agreement between the parties hereto and the terms of this release are contractual and not a mere recital.

I further state that I **HAVE CAREFULLY READ THE FOREGOING RELEASE AND KNOW THE CONTENTS THEREOF AND I SIGN THIS RELEASE AS MY OWN FREE ACT.** This is a legally binding agreement which I have read and understand.

Parent or Guardian

Date