

## South Pointe Christian School RE-ENROLLMENT FORM

Circle Grade Entering (2022-2023): K5 1 2 3 4 5 6 7 8 9 10 11 12

<b>Office Use Only: Date Form Received</b>		<b>Registration Paid</b>		<b>Book/Supply Paid</b>	
<b>Student Information</b>					
Student's Legal Name		Last		First	
				Middle	
Social Security #		Preferred Name		Sex	
				Age	
		Date of Birth		Month	
				Day	
				Year	
Address		Street or PO Box		City	
				State	
				Zip	
If parents are separated or divorced with whom does the student reside?					
List any legal authority or parental restrictions:					
<b>Father/Guardian Information</b>					
Name					
Mailing Address					
Date of Birth					
Relationship to Student				Email address	
Home Phone			Cell Phone		Work Phone
Employer			Occupation		
Name and city of church you attend					
Name of your Pastor					
<b>Mother/Guardian Information</b>					
Name					
Mailing Address					
Date of Birth					
Relationship to Student				Email address	
Home Phone			Cell Phone		Work Phone
Employer			Occupation		
Name and city of church you attend					
Name of your Pastor					
<b>Other Information</b>					
Physician				Phone #	
Dentist				Phone #	
Hospital Preference					
Insurance Company				Policy Number	
Emergency Contacts (if parents/guardians are unavailable)					
Name		Relationship		Home/Cell Phone	
				Work Phone	
Name		Relationship		Home/Cell Phone	
				Work Phone	
List known allergies, food restrictions, physical, emotional or behavioral disorders, and regularly administered medications:					
With whom may student be released other than parents?					
Name		Relationship		Home/Cell Phone	
				Work Phone	
Name		Relationship		Home/Cell Phone	
				Work Phone	
Name		Relationship		Home/Cell Phone	
				Work Phone	

(over please for signature)

**South Pointe Christian School  
RE-ENROLLMENT FORM (continued)**

**PLEASE READ CAREFULLY.** By signing this application, I understand and agree to all of the following:

1. My family's beliefs and practices are to be consistent with the standards, doctrine, and values of the school. Should my child not respond favorably for any reason to South Pointe Christian School or if conflict arises as a result of not being willing to accept the standards, doctrines, and values of South Pointe Christian School, I will not try to change the school to fit my needs but agree to quietly withdraw my child.
2. I have read and understand South Pointe Christian School's Parent/Student Handbook (a copy can be found on the website at [www.southpointechristianschool.org](http://www.southpointechristianschool.org)), and I agree to abide by the policies and procedures set forth therein.
3. South Pointe Christian School reserves the right of dismissal of any student who persistently and willfully neglects his academic work, exercises poor citizenship, reflects adversely on the Christian principles of the school, or is engaged in behavior or lifestyle inconsistent with Biblical guidelines as prescribed by South Pointe Fellowship.
4. I agree to make every effort to attend scheduled Parent-Teacher Fellowship (PTF) meetings.
5. South Pointe Christian School will not administer over-the-counter medication or prescription drugs to students without a parent's signature on the Emergency Medical Information Form (available in the school office). All medication must be in the original container with child's name and directions for administering drugs clearly labeled. In the event of a medical emergency, I give permission for my child to receive first aid from a school employee and/or treatment as required by a physician.
6. I have read and agree to comply with the Tuition Contract. I also agree to comply with any withdrawal and/or payment penalties contained therein. I understand my, or my child's failure to comply with the school's policies will result in my child's dismissal without prior notice to me. School records and reports cards will be held for unpaid balances.
7. I understand final acceptance of my child is determined by the administration. The school has full discretion in the grade placement and promotion of my child.
8. Promotional advertisements are used by South Pointe Christian School. I understand and agree that my child may be used for such advertisements and that South Pointe Christian School is released from all liabilities.

\_\_\_\_\_  
Father/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Mother/Guardian Signature

\_\_\_\_\_  
Date

***South Pointe Christian School admits students of any race, color, national and ethnic origin to all rights, privileges, programs, and activities generally accorded or made available to students at the school. The school does not discriminate in the administration of its educational policies, scholarships, athletics, and other programs.***

**The following financial policies are also to be agreed upon for enrollment in South Pointe Christian School:**

1. Students **will not be allowed to attend class** if tuition becomes past due by more than 30 days.
2. Registration, tuition, and book and supply fees are **non-refundable**.
3. Students will not be allowed to participate in any school sponsored function if account is not current. This includes all students who are in K5-12 grades who are on the same family account.
4. All fees must be current to register for the next school year. A student will not be allowed to return to SPCS if there are any financial obligations remaining from the previous school year.
5. Transcript/diploma or any other school information will not be issued or transferred until all financial obligations have been met in full.
6. Due to general expenses and staff commitments, no reduction can be made in tuition due to absenteeism, school closings during inclement weather, pandemic related suspensions of operation, or for scheduled holiday closures, teacher workdays, etc.
7. After school care is a separate charge and is not included in your tuition payment.
8. A fee of \$30.00 will be charged to your account for returned checks.
9. A fee of \$50.00 will be charged for late payment after the 10<sup>th</sup> of each month and an additional \$25.00 after the 15<sup>th</sup> of each month.
10. For students K through 12<sup>th</sup> grade: A \$150.00 fee will be due if student withdraws. No records or information will be released until this fee is paid.

All financial information is mailed to the address of the student's residence or emailed to parents. It is the enrolling parent/guardian's responsibility to provide this information to SPCS office personnel.

***By signing this form, I acknowledge that I have read, understood, and agree with its provisions and accept responsibility for my child's financial account. I also understand that all fees that have been paid are non-refundable.***

\_\_\_\_\_  
Parent/Guardian's Signature

\_\_\_\_\_  
Date