



## WHAT YOU WILL NEED TO REGISTER (Pre-K)

1. Completed **Application for Admission** with \$150 application fee
2. Completed and signed **Tuition and Fee Schedule**
3. Completed and signed **Enrollment Contract**
4. Completed and signed **Withdrawal Policy**
5. Completed and signed **Emergency Contact, Medical Information, and Pickup Authorization**
6. Completed **Authorization for Automatic Draft** with voided check attached
7. Completed and signed **Website, Photo, and Publicity Release Form**
8. Completed **Emergency School Closing Form**
9. **Tennessee Health Record** from Physician
10. **Required Documents** (Social Security Card, Birth Certificate, Immunization Records, Proof of Custody\*, Power of Attorney\*)
11. Completed signature page of the **Parent-Student Handbook**. (Complete 2019-2020 Handbook is available for download on our website.)

\*if applicable



Application for Admission

Child's Information

Full Name: Last First Middle
Preferred Name: Birth Date: Age (as of 9/30/19):
Gender: Grade for 2019-20
Previous School: Phone Number:
T-Shirt Size (Circle one) XS YS YM YL AS AM AL XL 2XL Fax Number:
Referred by: How did you hear about CCS? (circle one) Sign Billboard Radio Internet Magazine Friend Newspaper Church Other
IEP Needs or diagnosis (if applicable) Local Church Congregation (Optional)

Family Information

Father's (or Guardian's) Name: Mother's (or Guardian's) Name:
Relationship to Student (Guardian Only): Relationship to Student (Guardian Only):
Copy of Custody Paperwork On-File (Guardian Only): Copy of Custody Paperwork On-File (Guardian Only):
Address: Address:
City, State, Zip: City, State, Zip:
Home Phone: ( ) Home Phone: ( )
Mobile Phone: ( ) Mobile Phone: ( )
E-mail Address: E-mail Address:
Employer: Employer:
Work Phone: ( ) Work Phone: ( )
Parent/Guardian Signature: Date:

Registration Fee of \$150 is due and payable upon receipt of this application by CCS and is non-refundable.
Clarksville Christian School admits students of any race, color, national, or ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at this school. It does not discriminate on the basis of race, color, national, or ethnic origin in administration of educational policies, admissions policies, scholarship and loan programs, and athletic and other school-administered programs.

# PRE-K TUITION AND FEE SCHEDULE 2019-2020

**REGISTRATION FEE:** A nonrefundable fee of \$150 is due with application.

**TUITION DEPOSIT:** This nonrefundable deposit (\$500) reserves your child's place in class and **is due on June 1, 2019. New students will be invoiced for \$500 after the child's application for admission has been accepted. Payment will be due upon receipt of this invoice if acceptance was issued after June 1, 2019.**

**\*\*\*ANNUAL TUITION OF \$5,800 IS DUE AND PAYABLE AUGUST 1, 2019.\*\*\***

**ANNUAL TUITION (Please choose either PK3 or PK4 and your preferred option for payment):**

\_\_\_ PK3: \$5,800 (\$500 deposit will be applied)

\_\_\_ PK4: \$5,800 (\$500 deposit will be applied)

\_\_\_ **Option 1:** 100% paid in full by August 1, 2019 (\$5,300 after deposit)

\_\_\_ **Option 2:** Pay half on August 1, 2019 and half on January 1, 2020 (\$2,650 x 2 after deposit)

\_\_\_ **Option 3:** After \$500 deposit has been applied, 10 monthly payments will be taken by automatic draft of \$530. Installments will be taken by automatic draft on either the 1<sup>st</sup> or 15<sup>th</sup> of each month (parent's choice) beginning August 2019 and ending May 2020.

**If my student is withdrawn after April 1, 2019, I understand that I will be financially responsible for tuition for the entire 2019-2020 school year.**

Name of Student \_\_\_\_\_

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

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

# CONTRACT OF ENROLLMENT

As the parent or guardian of a Clarksville Christian School student, and by signing the Parent-Student Handbook, I acknowledge and agree that I have full authority to enter into this Contract of Enrollment with Clarksville Christian School, Inc. In consideration of Clarksville Christian School accepting my child for enrollment and other good and valuable consideration, I agree to abide by the terms and conditions of the Contract of Enrollment as set forth herein. I further agree to abide by any and all rules and regulations of Clarksville Christian School.

**By signing this Contract of Enrollment, I further acknowledge and agree that, after April 1, 2019, I shall be financially responsible for the payment of tuition and any and all other school-related fees associated with said student for the entire 2019-2020 school year. No fees or deposits are refundable or prorated. I further agree that should I default in the payment of any fees due Clarksville Christian School, I shall be responsible for any and all expenses incurred by Clarksville Christian School associated with enforcing this Contract of Enrollment, including but not limited to court costs, discretionary costs and reasonable attorney fees. I further understand and acknowledge that should I default in the payment of any fees due Clarksville Christian School, my default shall result in the immediate termination of said student's enrollment. (\*See Tuition Schedule)**

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Student Name

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Grade

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Parent/Guardian Signature

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Date

# WITHDRAWAL POLICY

The Contract of Enrollment is a commitment for the entire 2019-2020 school year. Parents should notify the school as soon as they know that their child(ren) will be withdrawing. A “Withdrawal Clearance Form” must be completed stating the date of withdrawal, the reason for withdrawal, and all books (both classroom and library) have been returned. Immediately upon withdrawal from CCS, 100% of tuition, cafeteria, and any other fees on account are due before records will be released. Please set up an appointment with the bookkeeper to make arrangements.

**Clarksville Christian School’s withdrawal policy is as follows: If a student withdraws after April 1, 2019, the parent (or guardian) will be financially responsible for the payment of tuition and any and all other school-related fees associated with said student for the entire 2019-2020 school year. No fees or deposits are refundable or prorated. (Exception to the policy for tuition may be made for military families upon our receipt of official orders to move.)**

**If a student’s family has a non-military job change that requires them to move their primary residence out of the greater Clarksville area, they will owe only the remaining balance of their current semester tuition, as well as any unpaid fees.**

Both the parent and the principal must sign the “Withdrawal Clearance Form.” Transcripts will be sent to the new school upon request by that school. No academic credit can be given until the withdrawal process is complete. **No copies of files will be given to the parent, new school, etc. until the account is paid in full.** CCS will complete the records request from the new school and then seal the record once student has been withdrawn and paid in full. **A telephone call 48 hours in advance regarding withdrawal of a student will enable the office to have the form ready for signatures and will avoid delays in completing the process.**

### Withdrawal Process:

1. Formal Request (\*48 Hours’ Notice Required)
2. Withdrawal Paperwork Completed by the Guidance Counselor (all textbooks, fees cleared, current grades from the teachers, and signature of principal and the parent)
3. All fees and tuition are to be paid in full before records will be released.

\_\_\_\_\_  
Student Name

\_\_\_\_\_  
Grade

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

## Emergency Contact, Medical Information and Pick-Up Authorization

Child's Full Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ M F  
Sex

Ethnicity: Hispanic Asian Multiracial Black Pacific Islander White Other

Parent's/Guardian's Name Relationship Parent's/Guardian's Name Relationship

( )

( )

Phone #1 Cell Cell Phone Carrier

Phone #1 Cell Cell Phone Carrier

Email Address

Email Address

### Alternative Emergency Contacts

Primary Emergency Contact/ Can pick up? Yes No

Secondary Emergency Contact Can pick up? Yes No

( )

( )

Phone #1 Relationship

Phone #1 Relationship

### Others Authorized to Pick up Your Child

( )  
Name Phone # Relationship

( )  
Name Phone # Relationship

( )  
Name Phone # Relationship

( )  
Name Phone # Relationship

\*It is the responsibility of the parent to inform the office when any changes to those authorized to pick up your child occurs.

### Medical Information

Legal or Medical Alerts/Notes

Hospital/Clinic Preference

Military Dependent? Yes No

Physician's Name

Phone Number

Insurance Carrier

Policy Number

Food or Drug Allergies / Special Health Considerations

Is your child currently under the supervised care of a physician? Yes \_\_\_ No \_\_\_ If yes, please explain and include a list of any medications your child is currently taking. (Please use back or attach sheet if necessary.)

Please list any physical, emotional, intellectual, or other health-impaired disabilities with which your child has been diagnosed. This is to include any special needs, medical conditions (including allergies) or relevant history of the child.

I authorize all medical and surgical treatment, X-ray, laboratory, anesthesia, and other medical and/or hospital procedures as may be performed or prescribed by the attending physician and/or paramedics for my child and waive my right to informed consent of treatment. This waiver applies only in the event that neither parent/guardian can be reached in the case of an emergency.

Parent/Guardian Signature

Date

School Year

Child's Grade

**AUTHORIZATION FOR DIRECT DRAFT (ACH DEBITS)**

I hereby authorize Clarksville Christian School, Inc. to initiate debits on my bank account listed below for the purpose of collecting payments due. I understand that in any month I anticipate cash flow problems, I must contact the administration of the school at least three days prior to my draft date to make other arrangements. Further, I understand that for any month my payment is returned for insufficient funds, I will be required to submit to the school office the tuition payment plus an additional \$25 Returned ACH fee.

School Year: 2019-2020

Financial Institution: \_\_\_\_\_

Type of Account: \_\_\_\_\_ Checking \_\_\_\_\_ Savings

Day of Month: \_\_\_\_\_ 1<sup>st</sup> \_\_\_\_\_ 15<sup>th</sup>

This authority is to remain in full force until Clarksville Christian School, Inc. has received written notification from me of its termination in such timely manner as to afford Clarksville Christian School and the financial institution listed above a reasonable opportunity to act on it.

Name: \_\_\_\_\_ (As shown on account)

Address: \_\_\_\_\_  
\_\_\_\_\_

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Student(s) Name: \_\_\_\_\_

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

Please attach a voided check with this authorization **or** initial below.

\_\_\_\_\_ Please continue using my account information on file (current accounts only).





## WEBSITE, PHOTO, AND PUBLICITY RELEASE FORM

Clarksville Christian School is utilizing the Internet and the latest technologies through its school website at [www.clarksvillechristianschool.org](http://www.clarksvillechristianschool.org) and Sycamore Education to streamline communications and support student learning. The CCS website is primarily used to publish school and related information for new and prospective students and their families, while Sycamore Education is geared toward current students and their families. As such, student photographs may be included to highlight school and class projects and activities. The student's full name and other personal information such as address and telephone number will NOT be published on the CCS website, but is listed internally in Sycamore Education unless opted out by the parent. However, photos of groups of students (such as a class or team picture) may be published on the CCS website, Sycamore Education, or the official CCS Facebook page WITHOUT parental or guardian permission.

Additionally, CCS is making a concentrated effort to promote the positive activities, honors, and work of our staff and students. This includes working with the local newspapers, radio, and television stations. At times, there will be opportunities for various students to be interviewed and/or photographed and **identified by name and classroom or school** (i.e. recent articles about CCS in the Leaf-Chronicle). However, we understand that some parents may request that we do not identify their child(ren).

Please **choose and initial one of the two options below.**

\_\_\_\_ I **give permission** to use individual and group photographs of my child on the school web site, Sycamore Education, and the official CCS Facebook page following the guidelines above. **I also give permission** for my child to be interviewed, identified, and/or photographed/filmed for use in publications, including, but not limited to, videos, newspapers, radio, or television.

\_\_\_\_ I **do not give permission** to use individual photographs of my child on the school web site, Sycamore Education, or the official CCS Facebook page. Additionally, **I do not give permission** for my child to be interviewed or photographed for any publications other than the CCS web site. I do understand that photos of groups of students may be published on the CCS website, Sycamore Education, and the official CCS Facebook page WITHOUT parental or guardian permission.

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Name of Student \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

## EMERGENCY SCHOOL CLOSING FORM

In the event of inclement weather, television Channels 2, 4, and 5 will report school closing information for Clarksville Christian School as well as *The Leaf Chronicle* and *Clarksville Now*. Additionally, school closings will be sent by email, text message, and posted on the official CCS Facebook page.

In the event of a weather-related or emergency school closing, Clarksville Christian School needs to know where to send your child. Please select one of the following options:

\_\_\_\_\_ A person on my emergency contact list or I will pick up my child.

\_\_\_\_\_ Send my child to Hilldale Christian Child Care Center (**Ages 4-12 only - see important note below**).\*

\_\_\_\_\_ Send my child to Clarksville Christian School After Care (**Ages 13-18 only**).  
Extended care closings are reported on Channels 2, 4, and 5.

\_\_\_\_\_ My student will drive himself/herself home.

Hilldale Christian Child Care Center (HCCCC) Information:

\*Only students who are registered and using after-school care have the option to go to HCCCC (if they remain open). HCCCC also reports closings on Channels 2, 4, and 5.

Additionally, HCCCC is occasionally open when school is closed due to bad weather. Registered students with HCCCC may come to the child care on such days at an additional cost if space permits. Please check with HCCCC for specific cost.

\_\_\_\_\_  
Name of Child

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

\_\_\_\_\_  
Date

# **Acknowledgement of Receipt and Agreement to Adhere to 2019-2020 Parent-Student Handbook**

I \_\_\_\_\_ hereby acknowledge that I have received, read, and reviewed the policies in the Parent-Student Handbook, and do agree to adhere to all policies and regulations stipulated within. I understand that policies are interpreted and enforced by the school administration. Any questions or concerns about policies should be expressed to the administration, but will not exempt me from adherence to them. I further understand that any aspect of this handbook can be modified, amended, or otherwise edited by school administration with or without prior notice. I understand when substantive changes are made, the school will strive to communicate those changes when and where appropriate.

Student Signature \_\_\_\_\_

Date \_\_\_\_\_

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

Date \_\_\_\_\_