

STUDENT INFORMATION

Student's Church Affiliation _____ Member? _____
City _____

Church Attendance: Regular _____ Occasional _____ Never _____
Sunday School: Regular _____ Occasional _____ Never _____
Youth Group: Regular _____ Occasional _____ Never _____

Pastor _____ Youth Pastor _____

School last attended _____ Phone _____

Address _____
City _____ State _____ Zip _____

Principal _____ Counselor _____

Please circle the areas that are of interest to your student:
Art Music Academics Social athletics

Has the student had problems in school with regard to:
____ Social adjustment ___ Discipline _____ Academic _____ Other (please explain)

Has the student been in any difficulty with civil or juvenile authorities? _____ If so, please explain.

Who referred you to our school? _____

Are you applying for the admission of all your children of school age? _____
If not, why? _____

Please state briefly the basic tenets of your personal religious convictions: _____

For the safety and best interest of the student, if there are legal agreements that involve taking the student to and from school or restrictions of visitation/custody, we must have these documents in the student's record.

No student will be refused admission on the basis of race. Liberty Christian School Redding is committed to a policy of non-discrimination on the basis of ethnic origin or sex in its admissions policies, educational programs, activities, and employment.

All immunizations for entering school must be current at time of entrance.

A Certified Birth Certificate must accompany this application for student's entering Kindergarten or entering school from out of state. A copy of this document will be made by the school office for the student's file.

Parent Signature

Parent Signature

We understand the registration fee is non-refundable

Parent Initial

Parent Initial

LIBERTY CHRISTIAN SCHOOL REDDING
STATEMENT OF COOPERATION

FOR NEW PARENTS AND STUDENT ENROLLEES: Please read the entire Handbook for Parents and Students before signing the application forms. This will give opportunity for any questions to be answered by the administration before a misunderstanding arises. Please read especially the section on "Privilege of Attendance."

FOR RETURNING PARENTS AND STUDENT ENROLLEES: Please review your Handbook before signing the application form and signature line below.

FOR ALL PARENTS - PLEASE READ THE FOLLOWING: Upon acceptance of the student described on the attached application, we hereby agree to accept all rules and regulations of the school and authorize the school administration to exercise such disciplinary measures as may be deemed necessary and proper.

We will give active support to the school program in every way and strive to be regular in attendance at parent meetings and other school functions to which parents are invited.

We agree that our child may participate in all regular school functions including field trips away from the school premises, and we absolve the school from liability to us or our child because of any injury which may occur to our child at school or during any school activity.

We understand that the school reserves the right to dismiss any student who does not respect and maintain the school's spiritual and academic standards.

We have read the religious instruction section of the student handbook and agree to these concepts being taught to our child.

We agree that if our child should become involved in any trouble or if we disagree with any policy set by the school, we will in no case complain to any other party, and in the spirit of meekness, will register only necessary complaints with the teacher or administration (Matthew 18:15-17). If the complaint is with a teacher, we will go directly to that teacher before taking the complaint to the administration.

We understand that assessments will be made to cover damage to school property (including window breakage, abuse of books, etc). We understand also that some fees may be charged for courses or activities that require extra financial expense.

We agree to pay all of our financial obligations to Liberty Christian School Redding on or before the due date. Financial obligations shall include, but are not limited to, tuition as set forth in the enclosed tuition schedule. We understand that our annual tuition is payable in ten (10) equal monthly installments (August 1 thru May 1) or may be paid in full by August 1st.

We understand that all tuition payments are due and payable on the first of each month. **If payment is not received by the 5th of the month, your account on file will be charged. Unpaid balances will incur a late fee.**

Father's Signature

Mother's Signature

Dear Liberty Christian Families,

All registrations require the submission of an ACH Authorization Form. **Payments are due on the 1st day of each month. If payment is not received by the 5th of the month, your account on file will be charged.** *Overdue accounts will be assessed a late fee on the unpaid balance. It is important that tuition is paid on schedule to assure the school's ability to meet its financial obligations.*

In the case of families who do not have a form on file, both first and last month's tuition is due before your student can begin school.

Your signature below indicates you understand and agree to these terms. Thank you!

Debbie Signor,

Principal

Liberty Christian School Redding



ACH Payment Authorization

You authorize regularly scheduled charges to your checking/savings account. You will be charged for each service below each billing period. A receipt for each payment will be provided to you and the charge will appear on your bank statement as an "ACH Debit". You agree that no prior-notification will be provided unless the date or amount changes, in which case you will receive notice from us at least 10 days prior to the payment being collected.

I _____ authorize Liberty Christian School Redding to charge my
(Full Name)
bank account indicated below for:

___ Tuition (Monthly on ___ day of the month ___ Aug - May or ___ June - May)
___ Daycare ___ Enrollment Fee (At Enrollment) ___ Curriculum Fee (June 1st)

Additional Instructions: _____

Billing Information

Billing Address _____ Phone # _____

City, State, Zip _____ Email _____

Bank Details

Checking Savings

Account Name _____

Bank Name _____

Account Number _____

Routing Number _____



I understand that this authorization will remain in effect until I cancel it in writing, and I agree to notify Liberty Christian School Redding in writing of any changes in my account information or termination of this authorization at least 15 days prior to the next billing date. If the above noted payment dates fall on a weekend or holiday, I understand that the payments may be executed on the next business day. For ACH debits to my checking/savings account, I understand that because these are electronic transactions, these funds may be withdrawn from my account as soon as the above noted periodic transaction dates. In the case of an ACH Transaction being rejected for Non-Sufficient Funds (NSF) I understand that Liberty Christian School Redding may at its discretion attempt to process the charge again within 30 days, and agree to an additional \$25 charge for each attempt returned NSF which will be initiated as a separate transaction from the authorized recurring payment. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law. I certify that I am an authorized user of this bank account and will not dispute these scheduled transactions with my bank; so long as the transactions correspond to the terms indicated in this authorization form.

SIGNATURE _____
(Account Holder's Signature)

DATE _____

LIBERTY CHRISTIAN SCHOOL REDDING

2970 Hartnell Ave
Redding, CA 96002
(530) 222-2232
FAX (530) 222-1784

**NEW ENROLLMENT
REQUEST FOR RECORDS**

First M/I Last Date of Birth

This student has enrolled in our school. Please send us the student's cumulative folder including attendance records, test data, health records, counseling information, and report cards including withdrawal grades if a student left in the middle of a grading period. For high school students, please send a copy of the student's transcript including credits earned to date.

Records transferred by authorization of this release will not be released to any person or agency other than the one listed above.

Registrar

PARENT RELEASE FORM

DATE _____

I hereby authorize the release and exchange of confidential psychological, cumulative records, and medical information concerning:

Student Name Date of Birth Grade

to LIBERTY CHRISTIAN SCHOOL REDDING

Parent or Guardian

Registrar