



# Enrollment Form and Financial Contract

School Year 2010/2011

Student name: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Gender: M / F

Parents: \_\_\_\_\_ Married Separated Divorced

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

City/State/Zip: \_\_\_\_\_ Home Phone: \_\_\_\_\_

School District in which you live: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Email: \_\_\_\_\_

Address (if different than student's): \_\_\_\_\_

Cell: \_\_\_\_\_ Work: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Email: \_\_\_\_\_

Address (if different than student's): \_\_\_\_\_

Cell: \_\_\_\_\_ Work: \_\_\_\_\_

List siblings and ages: \_\_\_\_\_

## EMERGENCY INFORMATION

Please list two persons who could be contacted if you (the parent) cannot be reached in an emergency requiring medical attention.

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Authorized to take child? Yes No \_\_\_\_\_

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Authorized to take child? Yes No \_\_\_\_\_

# MAG CHRISTIAN SCHOOL

## Enrollment Form

### Questions about your student:

To be completed by parent or guardian.

1. Describe your child's personality and interests. \_\_\_\_\_

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2. Describe the goals you have for your child spiritually, academically, and socially. \_\_\_\_\_

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3. Has your child ever repeated or skipped a grade, had special tutoring, or participated in remedial or enriched classes? If yes, please describe. \_\_\_\_\_

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4. Has your child ever received educational services/assistance or been seen by a learning specialist, school psychologist, or other mental health professional? \_\_\_\_\_

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5. Has your child ever been subject to disciplinary action in any school? If yes, please describe. \_\_\_\_\_

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6. Has your child been under care for any physical difficulty or does your child have any physical challenges and/or limitations? \_\_\_\_\_

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7. Does your child have any food, drug, or other allergies? \_\_\_\_\_

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8. Does your child have any special diet needs? \_\_\_\_\_

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9. Please list your child's participation in extra-curricular activities, sports, and hobbies in the last year. \_\_\_\_\_

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10. List the name and address of any schools your child has attended, including preschools. \_\_\_\_\_

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# MAG CHRISTIAN SCHOOL

## Enrollment Form

### Authorization to Release School and/or Educational Records

If your child attended another school prior to MAG Christian School, please fill out the following release.

To: (School name) Re: (student name)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Student's birth date: \_\_\_\_\_

YOU ARE AUTHORIZED to release to MAG Christian School all information from the school/education and disciplinary records maintained while my child was a student at the above educational facility. I give my permission for the educational facility to speak with the Administrator of MAG Christian School about my child's educational/behavioral history.

I specifically request copies of the following documents to be provided to MAG Christian School:

<input type="checkbox"/> Grades/Transcript	<input type="checkbox"/> Grade Standard Test Results (MN)
<input type="checkbox"/> PSAT/SAT/ACT tests taken	<input type="checkbox"/> Achievement Test Scores
<input type="checkbox"/> Special Education reports	<input type="checkbox"/> Discipline reports
<input type="checkbox"/> Psychological evaluations	<input type="checkbox"/> Immunization records/Physicals
<input type="checkbox"/> Other: specify _____	

The information is needed for consideration of my child's admission into MAG Christian School.

I understand that I may revoke this consent at any time and that this consent will continue in force for one year from the date of my signature, or until specifically revoked by me in writing. I do not authorize further release to any other third party.

A photocopy of this authorization shall have the same legal effect as the original signed copy.

Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

# MAG CHRISTIAN SCHOOL

## Enrollment Form

### Tuition Costs and Payment Schedules:

Please indicate preferred payment plan.

#### Kindergarten Readiness - \$1850 per year

12 monthly installments June 1 through May 1	155.00 _____
Quarterly installments due July 1, October 1, January 1, and April 1	463.00 _____
Bi-annual installment due July 1 and February 1	925.00 _____
Payment in full due August 1 is subject to a \$50.00 discount	1800.00 _____

#### All day/Every day Kindergarten - \$3500 per year

12 monthly installments June 1 through May 1	292.00 _____
Quarterly installments due July 1, October 1, January 1, and April 1	875.00 _____
Bi-annual installment due July 1 and February 1	1750.00 _____
Payment in full due August 1 is subject to a \$100.00 discount	3400.00 _____

#### Lower Elementary - \$3600 per year

12 monthly installments June 1 through May 1	300.00 _____
Quarterly installments due July 1, October 1, January 1, and April 1	900.00 _____
Bi-annual installment due July 1 and February 1	1800.00 _____
Payment in full due August 1 is subject to a \$100.00 discount	3500.00 _____

#### Upper Elementary - \$3800 per year

12 monthly installments June 1 through May 1	317.00 _____
Quarterly installments due July 1, October 1, January 1, and April 1	950.00 _____
Bi-annual installment due July 1 and February 1	1900.00 _____
Payment in full due August 1 is subject to a \$100.00 discount	3700.00 _____

#### Multi-family discount

Families with three or more children enrolled in Kindergarten or above are entitled to a \$500 discount for the 3<sup>rd</sup> child and the 4<sup>th</sup> child is free. (Discount does not apply to Preschool or Kindergarten Readiness.)

I agree to the payment indicated above. I acknowledge that if I choose to change this payment schedule after June 1<sup>st</sup>, I will be assessed a **\$25 change fee**. Invoices are generated on the 15<sup>th</sup> of the month and are due on the 1<sup>st</sup>. Invoices that are not paid by the 10<sup>th</sup> of the month will be subject to a **\$25 late fee**. If my account falls more than thirty days in arrears, it will result in the withdrawal of my student(s). No health records, transcripts, report cards, SAT scores, or any other records will be released until the account is paid in full. A **\$25 check charge** will be assessed for any returned checks.

Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

# MAG CHRISTIAN SCHOOL

## Enrollment Form

### Early Withdrawal Policy

The parent or guardian responsible for payment is responsible for tuition and fees based on the following withdrawal timelines:

- If withdrawal occurs between August 1 and September 30, 50% of the remaining tuition must be paid.
- If withdrawal occurs between October 1 and December 31, 75% of the remaining tuition must be paid.
- If withdrawal occurs on or after January 1, 100% of the remaining tuition must be paid.

We recognize that there may be extenuating circumstances requiring a family to petition for early withdrawal without penalty. All petitions must be submitted to the Administrator in writing. Each petition will be addressed on an individual basis.

I have read and agree to the financial policy printed above.

Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

### Volunteer Policy

As a private school, we rely on the involvement of our families to help keep tuition costs as low as possible. The following outlines the details:

- Each family agrees to complete the correct number of volunteer hours.
  - Thirty-six (36) hours per school year if your oldest student is in Kindergarten or older.
  - Eighteen (18) hours if your oldest student is in Kindergarten Readiness.
  - Ten (10) hours if your oldest student is in Preschool.
- Each family needs to complete the first half of their required hours by the end of December. The second half of their required hours should be completed by the middle of May.
- Unfulfilled volunteer hours are billed at the rate of \$10 per hour.
- Families have the option of buying out their time in advance at a rate of \$10 per hour.
- Hours must be completed by an adult. Students can not complete volunteer hours.
- Volunteer hours are a per family requirement, not per student.

We understand the volunteer policy as explained above and commit to the following:

\_\_\_\_\_ We agree to fulfill the volunteer obligations outlined above.

\_\_\_\_\_ We prefer to buy out our time at \$10 per hour.

Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

# MAG CHRISTIAN SCHOOL

## Enrollment Form

### Family Directory

We publish an in-house directory so that families can contact each other for car pools, play dates, homework help, etc. Please check which information is alright to publish, or you can choose to opt out of the directory.

Student Name and classroom                       Home Phone  
 Parent Names     Cell Phones  
 Address     Email

We do not wish to be part of the directory.

### Medication Authorization

Prescription medication must be sent to school in the original container and a medication form will need to be filled out by a parent. With prior authorization, we can administer Advil or Tylenol (1 mg/year of age up to age 10) in the event of minor aches or pains not accompanied by a fever.

I authorize the staff of MAG Christian School to administer Advil/Tylenol (please circle preference) to \_\_\_\_\_.

Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

### Emergency Authorization

I give permission to MAG Christian School staff to make whatever emergency (first-aid, disaster evacuation, etc.) measures are judged necessary for the care and protection of my child while under the supervision of the school.

**In case of medical emergency, I understand that my child will be transported to Fairview Lakes Medical Center in Wyoming by the local ambulance unit for treatment if deemed necessary. Any expenses incurred will be the responsibility of the parents.**

It is understood that in some medical situations, the staff will need to contact the local emergency resource before the parent, child's physician and/or other adult acting on the parent's behalf.

Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

### Promotional Materials

To promote our school, MAG Christian School has my permission to take pictures, slides, or videos of my child in school and use it for promotional publication or on the website. No names will be attached to any child's picture.

Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_