

Vista Christian School

REENROLLMENT FORMS

2019/2020 School Year

NAME OF PERSON OR FAMILY WHO REFERRED YOU: _____

Are you an employee of Vista Assembly Church? yes part-time full-time

Are you an employee of Vista Christian School? yes part-time full-time

Student's Name: _____
Last First M.I.

Birth Date: ____/____/____ Gender: M__ F__ Grade applying for: _____

Home Address: _____
Street City State Zip

Home Phone: _____ Best Daytime Phone: _____

Student's home address above is also the address of:

Father Stepfather Other
 Name _____
 Occupation _____ Employer _____
 Work# _____ Cell# _____
 Primary # _____
 E-mail address _____
 Need to receive school mailings? Yes _____ No _____

Mother Stepmother Other
 Name _____
 Occupation _____ Employer _____
 Work# _____ Cell# _____
 Primary # _____
 E-mail address _____
 Need to receive school mailings? Yes _____ No _____

* OTHER PARENTS WITH JOINT CUSTODIAL RIGHTS*

Father Stepfather Other
 Name _____
 Address _____
 Occupation _____ Employer _____
 Work# _____ Cell# _____
 Primary # _____
 E-mail address _____
 Need to receive school mailings? Yes _____ No _____

Mother Stepmother Other
 Name _____
 Address _____
 Occupation _____ Employer _____
 Work# _____ Cell# _____
 Primary # _____
 E-mail address _____
 Need to receive school mailings? Yes _____ No _____

The tuition at VCS is based on a yearly fee. For your convenience, **tuition is divided into ten monthly payments, without regard to vacation and holidays and does not correspond directly with the months of the school year.** Please refer to the financial information sheet for current tuition fees.

Tuition and Extended Care fees are due in the school office by the 1st of each month. **Monthly invoices are sent home only when fees are delinquent.** Payments are late after the 9th of the month. A late fee of \$30.00 is added to all late tuition payments. A 10% late fee will be assessed on all late Extended Care fees and will be reapplied each month the bill goes unpaid. _____Initial here.

If you expect to be late with the Tuition or Extended Care fees, you will be expected to contact the school office as soon as possible.

If your Tuition account is past due for a second month, your child will be dismissed from attending class. The child will not be re-admitted to class until the account is resolved. _____Initial here. Extended Care services will be revoked for those who are 2 months behind in payment. _____Initial here. Report cards may be held in the office on overdue accounts until fees have been paid or acceptable payment arrangements made. If your account has reached this point and successful payment arrangements have not been made, your account may be referred to a collection agency.

By March 1, all past accounts must be balanced to maintain priority registration for the following year and to release your child's report card. Any re-enrollment registration money paid will be applied to past due accounts first. Re-enrollment will be reviewed and considered once your account is up to date.

Discount to Vista Assembly of God Tithing Church Members: Contact the church office (760-724-7099) to request membership information or confirmation of membership. Sign the appropriate places on the registration/enrollment form for the school. Attendance and giving records will be reviewed on a regular basis to continue the 10% VAG tithing member discount.

VISTA ASSEMBLY OF GOD – CHURCH MEMBERSHIP

I wish to apply for the church membership discount. I have reviewed the qualifications and meet the requirements. I understand church membership will be verified with the church office prior to receiving discount. I will be notified if I do not qualify.

Signed: _____ Relationship to student: _____

Signed: _____ Relationship to student: _____

REQUIRED INFORMATION AND SIGNATURE

VISTA CHRISTIAN SCHOOL
FINANCIAL CONTRACT AGREEMENT

As the parents/guardians of _____ I/we have read this tuition policy page and agree to abide by it. I/we understand my child is not enrolled at VCS until completed enrollment forms are returned, accompanied by registration and book fees, and the registrar has accepted proof of immunizations. Once testing and all appropriate forms are completed and reviewed, my enrollment packet will be considered for approval by the administration.

It is agreed that the registration fee is to be paid in full at the time of enrollment. When enrolling two or more children, a request may be made for registration fees to be allocated into payments. Failure to follow the payment schedule will result in late fees being applied to the registration amounts and/or may jeopardize class placement. Contact the office to request and discuss arrangements.

_____ Initial here. It is further understood that unless paid in full, the yearly tuition fee will be a monthly payment plan of 10 equal payments, due the 1st of each month. I understand this is a payment plan and does not correspond directly with the months in the school year. **Monthly payments begin August 1, 2019, and finish on May 1, 2020.** It is understood these fees are due on the 1st of the month and are considered late after the 9th of each month. **If paid after the 9th of the month, a late fee of \$30.00 will be added to my account.** Likewise, a 10% late fee will be assessed to any Extended Care charges not paid by the 9th of the month.

Signed: _____ Signed: _____

Date: _____ Date: _____

For tuition purposes, we rate the oldest child at the 1st child rate and all others at the multiple rates. Military and other discounts will be given at the time of enrollment. You may qualify for more than one discount; however, tuition may not be discounted more than a total of 15% when applying for multiple discounts. Verification will be required for all discounts given.

PAYOR INFORMATION

Name: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____

E-Mail: _____

Relationship to student: _____

Address: _____

City: _____ State: _____ Zip: _____

Required Information: Please Read & Sign

PARENT'S AGREEMENT

Please read carefully, sign, and return with enrollment forms.

Parent's Declaration

1. I have received and read, understand and agree to, the policies outlined in these forms. _____Initial.
2. I have shared appropriate information from these forms and the student handbook with my child(ren) regarding school rules and procedures. _____Initial.
3. I have read the Statement of Faith of VAG/VCS and have read the Parent/Student Handbook and agree to support both.
4. I authorize the staff of VCS to provide first aid and to secure emergency medical care for my child should it be necessary.
5. I will notify the school office in case of emergency, change of address, telephone, or place of employment.
6. I will give a two-week written notice if I withdraw my child from school.
7. I give permission for my child to participate in all VCS sponsored off-campus field trips.
8. I will contact VCS immediately if I am unable to make my monthly tuition payment on time. _____Initial.
9. In the event my child needs discipline at school, I will support the teachers and administration. I will pick up my child promptly should the Principal make that request. _____Initial.
10. In the event a problem arises which cannot be solved to the satisfaction of either party, this contract will become void and a two-week notice will be given for the dismissal of any child.
11. In regard to marriages which have been separated or terminated, both parties agree to communicate all pertinent school & class information between one another and to not hold VCS responsible to inform each party individually. _____Initial.
12. I agree to supply any pertinent information regarding custody, visitation, or other related issues to the school and agree to hold harmless the school in attempting to uphold orders. If paperwork is not present, I also agree to hold harmless the school from issues regarding custody due to lack of information to uphold.

Student Name: _____ Grade: _____

Parent Signature: _____ Date: _____

STUDENT STANDARDS

As a student of VISTA CHRISTIAN SCHOOL, I recognize I have the privilege of attending a Christ-centered school and acknowledge this truth should be self-evident in my classroom, on the playground, and in my personal demeanor.

Therefore, I promise to:

- Submit willingly to those in authority over me. This includes my teachers, support staff and the principal.
- Strive to act and speak in a way pleasing to the Lord Jesus. I will not use any profanity or vulgar gestures.
- Work to keep a teachable and cooperative attitude.
- Treat fellow students, teachers and others at school in a kind, respectful manner.
- Work diligently to achieve my own personal best in the realm of academics.

By signing this agreement, I understand failure to comply with these standards may be cause for suspension and/or permanent removal from school.

Student Signature _____ Date _____

I affirm I have read and discussed these standards with my child.

Parent Signature _____ Date _____