

Parent/Student Enrollment Application & Contract

20___-20___ School Year

Student's Ful	l Name						
Age							
Parent/guard	Parent/guardian name(s)						
Address:							
	(Mom)						
Email: (Dad) _	(Mom)						
Please mark the class or program for which you are enrolling your child for the school year:							
Infants	Infants must be 6 weeks old	*Full Time Part time					
One's	One's are turning 1 year by September 1	*Full Time Part time					
Two's	Two's are children turning 2 by September 1	*Full Time Part time					
ЗК	Children are turning 3 by September 1 Children must be potty-trained	*Full Time Part time					
4K	Children are turning 4 by September 1 Children must be potty-trained	VPK ONLY					
	Early Bird only (7:00-9:00 am)						
	Wrap around extended care (12:00-6:00 pm)						
*Full time is more than 30 hours/week							
Afterschool	$1^{st}_{2}^{nd}_{3}^{rd}_{4}^{th}_{5}^{th}_{m}$	*Full Time Part time					
Elementary School Name:							

Epiphany Lutheran School admits students of any race, nationality, and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. Epiphany does not discriminate on the basis of race, color, nationality or ethnic origin in administration of its educational policies and admission policies.

In consideration of the covenants contained herein and other good and valuable consideration, the parties agree as follows:

- I/We agree to pay all fees and tuition in accordance with the ELP Tuition and Fee Schedule. I/We understand that upon acceptance of this contract by the Preschool it will become a binding document. <u>These fees shall become</u> <u>non-refundable upon acceptance of this agreement by the Preschool</u>. Tuition is the same each month no matter how many school days are in the month.
- I/We understand all school applications are made through the Director to the School Board of ELP who shall have the right to accept or reject any application. Students accepted shall be enrolled for the entire school year. No application for admissions to ELP will be considered without registration and supply fees, which is non-refundable. Fees will be pro-rated for students entering ELP after the beginning of the school year.
- 3. I/We understand that my child's attendance is a privilege and not a right. ELP reserves the right to terminate, at its discretion, any child's enrollment if at any time the conduct or cooperation with school authorities of either student or parent is not in keeping with the school standards. Any withdrawal by parents requires a two-week notice and a two-week payment.
- 4. I/We understand that upon the date of my child's acceptance to any ELP class or program, the registration fee and supply fees, are due. *These fees are NOT refundable under any circumstances.*
- 5. I/We understand that tuition is due by the 1st of each month with a grace period extending to the 10th of the month. On the 10th of each month, a late fee of \$30.00 will be assessed if payment has not been received. Failure to pay all fees in full, including the late fee, by the 15th of the month will result in the student being dismissed from the school and the account turned over to a collection agency.
- 6. I/We understand that ELP hires teachers, purchases curriculum, and makes other financial commitments on a yearly basis, and these commitments are largely determined by the number of enrollment contracts.
- 7. Should I/we fail to meet our obligations hereunder and the school is required to pursue legal action, I/we agree to pay all costs of such action, including reasonable attorney's fees. Venue for any legal proceeding brought to enforce this contract shall lie in Leon County, Florida. This contract shall be construed in accordance with Florida Law. It shall not be construed more strictly against one party or the other.
- 8. I/We agree to give our endorsement and to comply with all the policies, rules, and regulations for the operation of ELP as they now exist or are hereafter amended. We further agree to bring any criticisms or concerns directly to the appropriate authority (teacher, administration, or school board), depending upon the nature of the concern. We will adhere to the guidelines outlined in the ELP parent handbook regarding conflict resolution according to Matthew 18.
- 9. 1/We understand that tuition alone does not cover the operating expenses of ELP and that the school's budget is met through tuition, fees, fundraising and private contributions. We will prayerfully consider ways that our family can help meet the financial needs of ELP through voluntary waiver of discounts, special contributions, and participation in fundraisers.
- 10. I/We pledge to support ELP by praying for and serving the school with our time and talents.
- 11. We understand that this contract may not be voided except by the action of the ELP School Board.

I/We have read this contract carefully and agree to all the terms and conditions sta	ited herein.
I/We understand that I/we jointly and severally owe all payments set forth herein.	I/we acknowledge receipt of
the full text of this enrollment application & contract.	

Parent Name	Date	

Signature _____

A space cannot be reserved without the application & contract along with registration and supply fees submitted.

FOR OFFICE USE ONLY TO ACKNOWLEDGE RECEIPT OF:

Tuition	Check #
Supply fee and/or Registration fee	Check #
VPK Certificate	Birth Certificate
Shot Record	ProCare
Letter of Acceptance	Physical

The mission of Epiphany Lutheran Preschool is to provide a high quality, loving, Christian environment for preschoolers, teaching them to know and follow Jesus as their Savior and Lord.

PERSONAL/FAMILY INFORMATION

Student's Name: _				Date of Birth:
	(Last)	(First)	(Middle)	
Student prefers to	be called:			
Father/Guardian:			Mother/Guardia	n:
Home Address:				
Work Phone:			Work Phone:	
Cell Phone:			Cell Phone:	
Email address:			Email Address:	
Occupation:			Occupation:	
The student resides	s with:BOT	H PARENTSF	ATHER MOTHER	OTHER
Are there any facto	ors that have occ	urred in your child	's life that we need to kno	w?
	Please prov	ide a conv of anv co	urt-ordered custody docume	ents with application.
	-		-	
Name(s) of brother	rs/sisters:		Date of Birth:	
		FAMIL	Y WORSHIP LIFE	
Policious Affiliation				
Check one of the fol _ Lutheran (_ Lutheran (_ Non-Luthe	llowing: Church/Missour Church/Other Sy eran Church	i Synod		
s your family active	in your church?	'YES	NO	
f you do not have a	church home o	r are inactive in you	ur church, would you be ir	nterested in information about Epiphany
Lutheran Church?		YESNO		
s your child baptize	ed?YES	NO Would you	like information on baptis	sm?YESNO