

Eagle River Christian School
Summer School Program
KR3 – 4th Grade



Enrollment Package

10336 E. Eagle River Loop Rd.

Eagle River, AK 99577

Phone: (907) 694-4602

Website: www.eagleriverchristianschool.com

Facebook: Principal Caldwell

EAGLE RIVER CHRISTIAN SCHOOL
KR3 – 4th Grade Summer Program
ENROLLMENT FORMS CHECKLIST

STUDENT'S NAME _____

- RATE SHEET
- FINANCIAL AGREEMENT
- TUITION PROMISSORY NOTE
- APPLICATION FOR ENROLLMENT
- CO-OPERATIVE AGREEMENT
- STUDENT EMERGENCY INFORMATION
- LEGAL CUSTODY POLICY
- OFF-CAMPUS AUTHORIZATION
- PHOTOGRAPHY CONSENT FORM
- BEFORE AND AFTER CHILDCARE PROGRAM
- PROOF OF MEDICAL EXAM (New to District or first time enrollees)**
- IMMUNIZATION RECORDS**
- BIRTH CERTIFICATE**

Eagle River Christian School
KR3 – 4th Grade Summer School Program

RATE SHEET

Summer School (KR3-4th) Registration Fee: \$100.00

KR-4th Grade - Summer Quarter \$1,600.00 May 29th — July 27th

FINANCIAL AGREEMENT

I/we understand that there is a **non-refundable registration fee.**

Tuition

\$1,600.00 **KR3- 4th** Summer Quarter May 29th – July 27th
\$533.33 Due May 10, 2018
\$533.33 Due June 10, 2018
\$533.33 Due July 10, 2018

Late Fees: Payments are due the 10th of every month. Payments received after the 15th day of the month will be charged a late fee of \$35.00. If payment is not received by in a timely manner, a notice of dismissal will be issued

Returned Checks: A service charge of \$35.00 will be charged for returned checks. Returned checks must be cleared within 5 days or your child will be considered withdrawn from the school.

Additional services will be charged on a monthly basis as utilized.

AGREEMENT

I/we agree to meet the financial obligations as outlined above and will submit to program requirements.

Father's Signature

Mother's Signature

Date

Date

Eagle River Christian School

2018 Summer School Program

Tuition/ Services Promissory Note

Amount \$ _____ Installment Amount \$ _____ Beginning: _____

Additional services will be charged on a monthly basis as utilized.

***Promisor #1:** _____

Date: _____ **Telephone:** _____ **E-mail:** _____

Mailing address: _____

Social Security Number _____ **Alaska Drivers License** _____

***Promisor #2:** _____

Date: _____ **Telephone:** _____ **E-mail:** _____

Mailing address: _____

Social Security Number _____ **Alaska Drivers License** _____

The Promisor promises to pay to the order of Eagle River Christian School (the payee), at Eagle River, Alaska (or at such other place as the Payee may direct in writing) the sum above with no interest. If payment is not received by the 15th of the month, a late charge of \$35.00 will be assessed on the 16th. If payment is not received by the 20th of the month a notice of dismissal will be issued. If financial obligation is not met by the end of the month the student will be dismissed.

The unpaid principal, late fees, and interest (if any) shall be payable in monthly installments as stated above, payable on the 10th of each month and past due as of the 16th of each month, beginning on date stated above and continuing until July 15, 2018 (the due date), at which time the remaining unpaid principal, fees, and interest shall be due in full. All payments on the note shall be applied first in payment of fees (if any) and any remainder in payment of principal. Other fees are due on a monthly basis.

If the note is not paid by the due date, or if an installment is not paid when due, the Promisor promises to pay all costs of collection, including reasonable attorney fees, whether or not a lawsuit is commenced as part of the collection process.

The Promisor reserves the right to prepay this Note in whole or in part prior to the Due Date with no prepayment penalty.

No renewal or extension of this Note, delay in enforcing any right of Payee under this Note, or assignment by Payee of this Note shall affect the liability of the Promisor. All rights of the Payee under this Note are cumulative and may be exercised concurrently or consecutively at the Payee's option.

This Note shall be construed in accordance with the laws of the State of Alaska.

If any one or more of the provisions of the Note are determined to be unenforceable, in whole or in part, for any reason, the remaining provisions shall remain fully operational.

All payments of principal and fees and interest on this Note shall be paid in the legal currency of the United States.

Executed this _____ day of _____ (month), _____ (year), at Eagle River, Alaska.

Promisor's Signature #1: _____

Promisor's Signature #2: _____

Approved: _____

EAGLE RIVER CHRISTIAN SCHOOL
KR3 – 4th Grade Summer School Program
APPLICATION FOR ENROLLMENT

STUDENT INFORMATION

Name _____
(Last) (First) (Middle)

D.O.B. _____ Grade To Enter _____

Physical Address _____

Mailing Address _____

City _____ State _____ Zip _____

Home Phone _____ E-mail _____

FAMILY INFORMATION

Father's or Male Guardian's Name _____

Mailing Address _____

Employer _____ Work Phone _____

Cellular _____ E-mail _____

Mother's or Female Guardian's Name _____

Mailing Address _____

Employer _____ Work Phone _____

Cellular _____ E-mail _____

Marital Status: Married _____ Widowed _____ Divorced _____ Separated _____ Single _____

Siblings _____

EAGLE RIVER CHRISTIAN SCHOOL
STUDENT EMERGENCY INFORMATION
SUMMER SCHOOL

| | | |
|--------------------|-------------|--------------|
| Student Name _____ | Grade _____ | D.O.B. _____ |
| Student Name _____ | Grade _____ | D.O.B. _____ |
| Student Name _____ | Grade _____ | D.O.B. _____ |
| Student Name _____ | Grade _____ | D.O.B. _____ |

Mother's Name _____ Home Phone _____
Work Place _____ Phone _____
Cellular _____ E-mail Address _____
Home Address _____
Mailing Address _____

Father's Name _____ Home Phone _____
Work Place _____ Phone _____
Cellular _____ E-mail Address _____
Home Address _____
Mailing Address _____

PERSON(S) OTHER THAN FATHER OR MOTHER TO CONTACT IN CASE OF EMERGENCY:

Name _____ Phone _____
Person's Relationship to Family, I.E. Aunt, Friend, etc. _____

Name _____ Phone _____
Person's Relationship to Family _____

Please indicate any special medical problems your child may have _____

(If your child has certain food allergies, elements, animals, drugs. It is vital to have this information on file)

Allergies _____

Medications _____

INDIVIDUALS AUTHORIZED TO TRANSPORT MY CHILD(REN) TO AND FROM SCHOOL:

Name _____ Phone _____
Name _____ Phone _____
Name _____ Phone _____
Name _____ Phone _____

Childcare arrangements you may have:

Before school _____ Phone _____
After school _____ Phone _____

AUTHORIZATION FOR EMERGENCY CARE TO MINOR

Complete One for Each Student Enrolled in Eagle River Christian School

| | | |
|-----------------------------|------------------------|---------------|
| Student Name (Last): | First: | Grade: |
| Home Phone: | Health Insurance with: | |
| Mother's Work Phone: | Policy Holder: | |
| Father's Work Phone: | Policy Number: | |

In case of emergency illness or accident the child is given first aid and the parents are notified. If the parents or the child's doctor cannot be located, the child will be taken to the Emergency Room of your choice. The School does not assume responsibility for the payment of hospital, doctor or ambulance fees.

Emergency Room Preference: _____

Physician Preference: _____ Phone _____

Dentist Preference: _____ Phone _____

I/We the undersigned, parent(s) or legal guardian of the minor(s) listed below:

(Minor's Name)

Date of Birth

do hereby authorize any x-ray examination, anesthetic, dental, medical or surgical diagnosis or treatment by any physician or dentist licensed by the State and hospital service that may be rendered to said minor under general, specific, or special consent of an acting agent of the school, the temporary Custodian of the minor, whether such diagnosis or treatment is rendered at the office of the physician or dentist, or at a hospital licensed by the State. I/We authorize the physician or dentist to call in any necessary consultants, in his/their own discretion. I/We further authorize said physician or dentist to exercise his/their discretion in authorizing the disposal of any severed tissues or member.

It is understood that this consent is given in advance of any specific diagnosis or treatment being required, but is given to encourage those persons who have temporary custody of the minor, and said physician or dentist to exercise his/their best judgment as to the requirements of such diagnosis or medical or dental or surgical treatment.

Signature of Parent or Legal Guardian

Date

This consent shall remain effective for the duration of the student's enrollment at Eagle River Christian School (PK3-12) unless revoked in writing, delivered to said physician or dentist of the said persons entrusted with the custody, care and control of said minor child.

| | | | | |
|---|--------------------------------------|----------------|-----------|----------------|
| Date: | Father's(Guardian) Signature: | | | |
| | Mother's(Guardian) Signature: | | | |
| Authorization of Non-Prescription Medication | | | | |
| The school staff has my permission to administer the following if needed to my child: | | | | |
| Medication | Yes | Initial | No | Initial |
| Tylenol | | | | |
| Throat Lozenge | | | | |

*Additional/Alternative medication must be provided by parents to the school staff for administration to students.

Eagle River Christian School

Legal Custody Policy

1. A single parent, grandparent, or a foster parent must provide written documentation of the legal custody of the child /children enrolled, i.e. a court decree or private settlement agreement.
2. Only the person who has legal custody of the child/children has the authority to make decisions regarding the child's/children's education.
3. If divorced parents share legal custody of the child/children, with written documentation provided the school, both parents must agree on decisions relating to matters of education and medical care.
4. Grandparents and foster parents still need approval from the child's/children's parents regarding educational decisions.
5. Legal custody of a child/children must be established before enrollment is completed.

All legal custodians must:

- A. Sign the school enrollment contract.
- B. Foster parents must provide the school with legal papers that show they have legal custody and authority to make educational decisions for students enrolled.
- C. If a foster parent does not have sole legal custody, signed authorizations from both non- custodial parents and from the foster parents, must be provided for children who are enrolled.
- D. If a grandparent is merely a baby sitter and does not have legal custody, the school enrollment contract must be signed by both the parents and the grandparents.
- E. Enrollment will not be complete until permission to enroll the child/children is given, in writing, by the parent named in the official custody papers as having authority to make decisions regarding the child's/children's education.
- F. Any restrictions in the official custody papers, not in keeping with official school policy will negate enrollment. Restrictions such as after school pick up, free exercise of religious instruction, and standard of conduct.
- G. Written directions in the official custody papers regarding the parent to: (1) call in an emergency, if the child fails to attend school, or if there is a discipline problem; (2) receive school notices; and (3) access the student's records will be followed.
- H. If a non-custodial parent is unavailable or the whereabouts are unknown, the person with legal custody must provide a signed affidavit disclosing such details and give information about plans to sever the absent parent's right to legal custody.

Eagle River Christian School
Summer School
Authorization For Off Campus Activities

Name of Student: _____ Date: _____

I consent to have my child participate on field trips away from school. I also authorize Eagle River Christian School to call an emergency ambulance in case of accident or acute illness and to arrange for all emergency medical care in case I am not immediately available. Any qualified physician, called by Eagle River Christian School staff, may treat and do whatever is necessary for the good health and well being of my child.

I also agree to accept all financial responsibility for medical care.

See emergency form for emergency room preference, dentist preference, and physician preference.

Father's Signature

Date

Mother's Signature

Date

Eagle River Christian School
Photography Consent Form

____ My child _____, may be video taped or photographed during school or school activities. Photos and write-ups about their participation in activities may be used in school newsletters, brochures, the school web site, newspapers or television. No photos or information will be given to "for-profit" businesses.

____ I do not want my child's picture on the website.

Signature of Parent or Legal Guardian

Summer School Billing for Child Care

May 1, 2018

Dear Parents,

In order to simplify the Summer School Before and After Care billing, we have revised the billing into two payments as seen below. Remember there are 9 weeks in the summer school program. The amounts shown are per student. There is a discount for siblings.

May 29 through June 29 will be one month *plus* one week.

Occasional before care \$8.00 daily rate

Occasional after care \$15.00 daily rate

Monthly before care \$93.75

Monthly after care \$250.00

Both before and after care \$343.75

July 2 through July 27 will be one month

Occasional before care \$8.00 daily rate

Occasional after care \$15.00 daily rate

Monthly before care \$75.00

Monthly after care \$200.00

Both before and after care \$275.00

Please call me @694-4602, if you have any questions.

Thank you,

Sandy Roderick

Administrative Assistant

Eagle River Christian School
SUMMER SCHOOL
KR3-4th Grade Before and Aftercare Program

Due to safety of children, school liability, and parent responsibility, the following procedures will be enforced. Any child who arrives at school before 8:00 A.M. or who remains after 2:30 P.M. and is not directly supervised by a parent or their official designee will be placed in Before/After Care and charged for services. This includes parking lots and grounds. Persons who are responsible and are in direct supervision of the children should accomplish pick-up and deliveries. With increased enrollment there are increased traffic and safety issues.

Before/After Care is available from 7:00 A.M. to 6:00 P.M., Monday through Friday when school is in session. This is a school extension and is not available to other children. **After 6:00 P.M. parents will be charged \$1 per minute.** The supervisor may at their discretion give some consideration for weather.

Students must be signed in and out (by an adult only) of the Child Care program to indicate time and the person taking charge of the student(s). A person other than the parent, whom picks up a student(s) must show I.D. and be on the emergency list and the parent must have contacted the school office.

Children should bring their own snacks for before and after care (microwave items allowed). **NO breakfast will be made after 7:30 am.**

Please check the appropriate possible use of before and after school care. There is no obligation to complete this except to help us to plan for appropriate supervision. In order to keep charges reasonable, charges cannot be prorated hourly. You will be billed at the end of the month. *There is a discount for additional students.*

- ___ Occasional Before Care \$8.00 per student (\$4.00 additional students)
- ___ Occasional After Care \$15.00 per student (\$7.50 additional students)
- ___ Monthly Before Care \$75.00 per student (\$37.50 additional students)
- ___ Monthly After Care \$200.00 per student (\$100 additional students)
- ___ Monthly use of both \$275.00 per student (\$137.50 additional students)

Student's name(s)

Parent Signature _____

