

Rivers Of Life Christian School Enrollment Form

Student Name: _____ Birth Date: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Grade to Enter: _____ Email Address: _____

Fathers Name: _____ Work #: _____

Fathers Employer: _____

Mothers Name: _____ Work #: _____

Mothers Employer: _____

School Attended Last Year: _____ Grade Completed: _____

Students Grades Were: _____ Above Average _____ Average _____ Below Average

Has your child ever been suspended or expelled from another school? _____

How did you hear about ROLCS? _____

Interested in: _____ School only _____ School +before and after care

Emergency Contact Information

Name: _____ Phone# _____

Address: _____

Childs Physician _____ Phone# _____

Does your child have any medical conditions, health problems, allergies, etc. that the school should know about? _____

Statement of Cooperation

In making application for my child to attend ROLCS I understand that it requires cooperation on the part of the school and the parent to provide the maximum opportunity for my child's progress. I will see to it that my child is at school on time, completes all homework assignments, and follows the dress code and rules. He/She is allowed to go on announced field trips. I also give permission to discipline my child in manners which the school deems fit and necessary for the improvement of behavior and character development (**Note: No corporal punishment will be given**). I will pay my tuition on time, pay any late fees, returned check fees, or before/after care charges that I have occurred. Tuition is due on the 1st day of the month. Tuition is considered late on the 10th day of the month and a \$35.00 late fee will be charged. Once tuition is late my child will not be allowed to attend classes until my account is back to a current status.

Parent Signature: _____ Date: _____