

The Little Country School

2019 - 2020

Application for Admission

STUDENT INFORMATION (List oldest student first)

1. Name _____ Grade entering _____

SS # _____

2. Name _____ Grade entering _____

SS # _____

3. Name _____ Grade entering _____

SS # _____

(Please Print)

Parent/Guardian's Name(s) _____

Mailing Address _____ City _____ State _____ Zip _____

Primary Parent E-mail Address _____

For Billing Purposes Only:

Billing Name _____ Home Phone _____

Billing Address _____ City _____ State _____ Zip _____

Please submit the following forms for each student registered:

- Completed Parent/Student Affirmation Form (last page of Student Handbook)
- Completed Application for Admission
- All Registration Fees (Registration Fee, Book-Use Fee, Activity Fee)
- Student Information Form
- Immunization Form (updates required for students entering K5 and 7th grade)
- Student Health Exam Form
- Copy of most recent Report Card
- Copy of Birth Certificate
- Copy of Social Security Card
- 6th graders must submit proof of scoliosis screening

*The Little Country School lovingly accepts all children
without regard to race, religion, sex, or national origin.*

Parent's Statement of Agreement:

1. I understand that all students are accepted on a 9 week trial basis. _____(initial)
2. I understand that The Little Country School has the right to enforce all of its rules and regulations as stated in the 2019 – 2020 Parent and Student Handbook and that these are compulsory. _____(initial)
3. I understand my child(ren) may be attending scheduled field trips and other activities throughout the 2019 – 2020 school year. _____(initial)
4. I understand no corporal punishment will be used. The administrators work with the teachers to develop age appropriate consequences for inappropriate behavior. _____(initial)
5. I understand the registration and financial information which has been provided, and I will be prompt in making all appropriate payments to the school. _____(initial)
6. I understand that Monthly Payments are due on or before the 1st of each month, and that a late charge of \$25.00 will be assessed on any payment made after the 10th of the month. _____(initial)
7. Returned Checks: I understand that there will be a \$40.00 charge for all returned checks. _____(initial)
8. I understand that ALL FEES ARE NON-REFUNDABLE. _____(initial)
9. I authorize The Little Country School to use and reproduce any and all photographs, audio or video tapes which TLCS takes of my children and any family members that may be produced for school literature, website, advertisements or promotional purposes, without any form of compensation. These images and recordings shall remain the property of The Little Country School, solely and completely. _____(initial)
10. All documents listed on page one of this application must be turned in to the office in order for registration to be complete. I also understand that my child will not be allowed to attend The Little Country School without all of these documents. _____(initial)
11. I understand that the dress code of The Little Country School requires that my child wear uniforms to school each day, and I agree to follow the dress code as set forth in the Parent/Student Handbook. _____(initial)
12. My child has permission to attend unscheduled field trips, such as: going out to lunch with the class, going to the park with the class, going for a walk off campus with the class, etc.
_____ Yes _____ No – Please call me first
13. If needed for a fever, the school personnel have permission to give my child Tylenol, if I am unable to be reached by phone. _____(initial)
14. We agree to meet all of our financial responsibilities on time, and we understand that failure to do so may result in our child(ren) not being permitted to return to class until our account is paid; and we further understand that these absences will not be excused. We also understand that a financial hold will be placed on our child(ren)'s report card(s) and school records until our account is paid. _____
(initial)

Agreement to Terms and Conditions:

In making this application, I understand and agree with all of the above information.

Parent or Legal Guardian's Signature

Date

2019 - 2020
Tuition and Fee Schedule

<u>Preschool – 5th Grade</u>	<u>6th – 8th Grade</u>	<u>9th – 12th Grade</u>
Reg. Fees \$150	Reg. Fees \$150	Reg. Fees \$150
Book-Use Fee \$300	Book-Use Fee \$300	Book-Use Fee \$300
Activity Fee \$125	Activity Fee \$125	Activity Fee \$125
Yearbook Fee \$25	Yearbook Fee \$25	Yearbook Fee \$25
Tuition \$6200	Tuition \$6500	Tuition \$6700
Total \$6800	Total \$7100	Total \$7300

_____ SUFS Scholarship - Any balance not covered by the scholarship is the parent's responsibility.
Large balances may be broken into 10 even monthly payments.

_____ McKay Scholarship - Any balance not covered by the scholarship is the parent's responsibility.
Large balances may be broken into 10 even monthly payments.

Intent Date: _____ Matrix Number _____

Parent's SS # for verification purposes of McKay Scholarship _____ - _____ - _____

Supplemental Fees for ESE (McKay Scholarship) Students (For Office Use Only)

_____ Instructional Program 1	+	\$350
_____ Instructional Program 2	+	\$1,150
_____ Instructional Program 3	+	\$1,500
_____ Instructional Program 4	+	\$3,700
_____ Instructional Program 5	+	\$4,200

Uniform Information:

Students at The Little Country School wear uniforms purchased from the store of your choice, but they must meet standards stated in the Parent/Student Handbook.

Note: All Preschool students must keep an emergency change of clothes at school.
These do not have to be uniform items.

Extended Day Program

The school opens at 7:00 AM and closes each day at 6:00 PM.

School hours are 7:50 AM – 3:30 PM.

Students may arrive at school as early as 7:00 AM before school and remain as late 4:00 PM after school without any additional fees. However, the fee for those parents needing the Extended Day Program after 4:00 PM will be as follows:

_____ One child:	\$100 per month
_____ Two children:	\$140 per month
_____ Three children:	\$185 per month

A daily rate of \$10 per day is available for those who only need to use it occasionally.

The Little Country School

2019 - 2020

Student Information Form

(Please Print)

Student Name (FML) _____ Nickname _____

Circle one: Male Female Birth Date _____ Birthplace _____

Social Security Number _____ - _____ - _____ Grade entering _____ Last School Attended _____

Home Phone _____ - _____ Home Address _____

City _____ State _____ Zip _____

Parent E-mail Address _____

FAMILY MEMBERS

Father's Name _____ Mother's Name _____

Step-mother (if applicable) _____ Step-father (if applicable) _____

Who does the child live with? _____

List all siblings (and grade if enrolled in our school) _____

FIRST CONTACT (Parent/Guardian Only)

Name _____ Relation to Student? _____

Custody? Y N Same address as the student? Y N (if no then list below) E-mail _____

Address _____ City _____ State _____ Zip _____

Work Phone _____ - _____ x _____ Employer _____ Position _____

Cell Phone _____ - _____ Home Phone _____ - _____

SECOND CONTACT (Parent/Guardian unless none available)

Name _____ Relation to Student? _____

Custody? Y N Same address as the student? Y N (if no then list below) E-mail _____

Address _____ City _____ State _____ Zip _____

Work Phone _____ - _____ x _____ Employer _____ Position _____

Cell Phone _____ - _____ Home Phone _____ - _____

THIRD CONTACT (Please list a third person to contact in case of emergency)

Name _____ Relation to Student? _____

Custody? Y N Same address as the student? Y N (if no then list below) E-mail _____

Address _____ City _____ State _____ Zip _____

Work Phone _____ - _____ x _____ Employer _____ Position _____

Cell Phone _____ - _____ Home Phone _____ - _____

MEDICAL INFORMATION

Doctor's name _____ Office number _____ - _____

Does the school have permission to call the student's doctor? Y N

List any medical conditions the school should be aware of _____

Insurance Company _____ Policy # _____

PICK-UP INFORMATION

List anyone else who is authorized to pick up this student other than family members listed above.

Name _____ Relationship _____ Phone # _____

Name _____ Relationship _____ Phone # _____