

# Full Life Christian Academy

8117 Hwy 614 Moss Point MS, 39562 | (228) 588-2651 | fax (228) 588-2640 office@fulllifechristianacademy.com

Dear Parent,

Welcome to Full Life Christian Academy! We are happy to have you as a part of our family!

Thank you for entrusting us with your most prized possession. We look forward to watching your student grow in ways he/she never thought possible!

Our prayer is that your student feels safe here and grows in their relationship with the Lord.

Please fill out this packet as soon as you can and return it to the school office. If not already on file from a previous year, please include a copy of your child's *Birth Certificate, Social Security Card, Immunization Certificate of Compliance*, and *Insurance Card* (if available). You will also be responsible for a *\$50 Registration Fee* (to secure your child's spot). Please note there is a page that needs to be notarized- *Item XII- Parent-School Agreement, page 8.* We will not accept incomplete applications.

While we are in the process of enrolling your child, please feel free to check out the website www.aceministries.com to further understand the curriculum. If you have any further questions, feel free to call (228) 588-2651 or email flchristianacademy@gmail.com.

We look forward to the upcoming school year, and to teaching and mentoring your child!

Shannon Hackney Principal Page left blank intentionally

### Application for Enrollment

#### I. Student Information

Student's Full Name			Birth Date	Socia	Social Security Number	
Age	Grade	Gender	Birthplace	Shirt	Size	
Studer	nt Allergies/Medi	cal Conditions?				
Curren	t Medications?					
Tyleno		Ibuprofe	eed arises): n Antacids N	eosporin Medio	cated Cough Drops	
Additio	onal Information	About Your Chil	d:			
<i>II.</i>	General Info	rmation				
Addre	SS		City	State	Zip	
Mothe	er's Name	Mot	her's Cell Number	Mother's Emp	loyer and Work Number	
Father's Name Fathe		ner's Cell Number	Father's Emplo	Father's Employer and Work Number		
III. Emergency Contact Information & Insurance Information						
Emerg	ency Contact #1		Phone Number	Relat	ionship	
Emerg	ency Contact #2		Phone Number	Relat	ionship	
	dividuals allowed ır child.	picking up your	child, please including dr	iver's license numbe	ers, as it will be needed to picl	

Hospital Preference

Insurance Provider Insurance Primary Insurance Policy Number

#### IV. Family Information

Church Name	Pastor	Phone Number	Attend Regularly?
Names of other children in fan	nily:		
Name	Gender	Age	

Additional Familial Information Needed To Better Minister To Your Child:

#### V. Legal

Are there any domestic/ court visitation/ DHR or Family Services situations that affect the custody, parental responsibility, or school pick up authorization? Yes\_\_\_\_\_ No\_\_\_\_\_

If yes, please provide Full Life Christian Academy the legal/ court documents for such. The administration reserves the sole right to request withdrawal of a child for the overall safety and welfare of the children/staff of the academy.

#### VI. Permission to Photograph

I, \_\_\_\_\_\_, do give permission for my child, \_\_\_\_\_\_, to be photographed during any school-sponsored activities and to be photographed for school related yearbooks, promotions, pamphlets, or any other activities that may be helpful for Full Life Christian Academy. If I do not want my child to be photographed for any particular event, I will notify the school in writing prior to the event. Once the event has taken place, any pictures taken become the sole property of Full Life Christian Academy. Copies of any photos taken may be purchased by the parents or legal guardians from the school for a fee to cover costs. I agree to this photography policy while my child is attending Full Life Christian Academy.

Parent or Guardian (Printed)

Parent or Guardian (Signature)

Date

#### VII. Permission for Field Trips

My child, \_\_\_\_\_\_\_, has permission to attend any school sponsored field trips with Full Life Christian Academy, its staff, and its sponsors. I hereby release them from responsibility and liability for any injury that my child may sustain during these activities. In the event of an emergency, I hereby authorize an adult leader of this activity as agent for me, to consent to any x-ray examination, medical, dental, or surgical diagnosis. I authorize any treatment and hospital care advised and deemed necessary by a physician, surgeon, dentist (as appropriate), licensed to practice under the laws of the state where services are rendered, whither at a doctor's office or in any hospital. I understand that I will be contacted as soon as possible.

Parent or Guardian (Printed)	Parent or Guardian (Signature)	Date

#### VIII. Full Life Assembly of God and Vancleave Assembly of God Liability Release

In consideration for being accepted by Full Life Assembly of God or Vancleave Assembly of God for participation in Full Life Christian Academy, I do hereby release, forever discharge, and agree to hold harmless Full Life Assembly of God or Vancleave Assembly of God and the team members thereof from any and all liability, claims, or demands for personal injury, sickness or death; as well as property damage and expenses of any nature whatsoever which may be incurred by the undersigned while said person is participating in the above described field trip.

*Furthermore, I hereby assume all risk of personal injury, sickness, death, damage, and expense as a result of riding in the shuttle bus or participation in recreation involved therein.* 

*Further, authorization and permission is hereby given to said school to furnish any necessary transportation, food, and lodging for the participation.* 

The undersigned further hereby agree to hold harmless and indemnify said church as the result of the negligent, willful or intentional acts of said participant, including expenses incurred attendant thereto.

*Further, should it be necessary for the participant to return home due to medical reasons, disciplinary action or otherwise, I hereby assume all transportation costs.* 

Parent or Guardian (Printed)	Parent or Guardian (Signature)	Date
Participant- if 18 or older (Printed	) Participant- if 18 or older (Signature)	Date
IX. Conduct		
Has the applicant had any previou	is discipline problems in school? Yes	No
Has the applicant ever been:	Suspended? Expelled?	
If yes was answered in any of the	above questions, please explain:	

Note: A behavior agreement will need to be signed by the student and parent and returned to the school office. Failure to agree to or abide by said agreement may result in removal from the school.

#### X. Counseling/ Testing

 Has the applicant ever undergone an educational evaluation administered by a clinical psychologist, psychiatrist, or counselor?

 Yes\_\_\_\_\_
 No\_\_\_\_\_

 If yes, please submit and copies of test results or consultation reports with this application.

 Has any attention-enhancing medication ever been prescribed for the applicant? Yes\_\_\_\_\_ No\_\_\_\_\_

**Medication Name** 

Dosage

#### XI. Terms and Conditions of Enrollment

"I understand that the school is an integral part of child training of which I am expected to support."

"I hereby commit to ensure that my children always witness my full support of school policy and discipline and that if I have an issue with anything related to the school, my children will not be aware of it. I will bring my issue to discussion with the school principal behind closed doors and my child will not be aware of any disagreement with the school. I will ensure that my children understand that the school and the parents are a unified force for the betterment of the child and to the Glory of God."

"I appreciate the high standards of the school and will not tolerate profanity, obscenity in word or action, dishonor to God, or the Word of God, or disrespect to the staff of the school. I hereby agree to support the regulations of the school and authorize the school to employ discipline as it deems wise and expedient for the training of my child. "I understand that the school reserves the right, after a parental conference to dismiss any child who fails to comply with established regulations and discipline or whose parents do not assume their responsibilities to the school."

"I agree to complete parent orientation and understand and agree to the terms stated on this application" "I understand that my child is expected to take part in school activities including PE and sponsored trips away from the educational facility, and I absolve Full Life Academy, the staff and management from all liability to me, my family or my child because of injury to my child or myself at any school activities."

Father's Signature	_	Date
Mother's Signature	_	Date
Legal Guardian's Signature	Relationship	Date

#### XII. Parent-School Agreement

IN ORDER TO SOLEMNIFY the desire of the undersigned parties to glorify the Lord with their obedience to Him and to promote a clear understanding of the duties and responsibilities of each party, the undersigned parties adopt the following agreement:

I, \_\_\_\_\_, for and in consideration of my child, \_\_\_\_\_, being admitted as a student at *Full Life Christian Academy*, do hereby accept such admission and the duties and responsibilities entailed therein and agree to be bound by the terms of this Agreement:

- I subscribe without reservation to the Articles of Faith and the Standards of Conduct of *Full Life Christian Academy* and agree that my family will abide by these doctrines in all aspects of our lives, both at and away from school ministries and functions. I am a member of (church name) \_\_\_\_\_\_\_, faithfully attending all public services and taking an active part in the total church program. I agree to be loyal to the pastor and the church programs in word and in deed. I agree to fulfill all duties and responsibilities of membership in the (church name) \_\_\_\_\_\_.
- 2. I understand and agree that the church and the school ministry are inseparable and that my child may be expelled from the school if either of us is out of fellowship with the church, as determined in the sole discretion of the pastor and the church leadership.

- 3. I have read and understand the Student Handbook and I agree with it completely. I agree that my child and I must abide by all of the policies, rules and regulations of the school, including those listed in the Student Handbook, and I agree to support *Full Life Christian Academy* with my conduct and my prayers.
- 4. I understand and agree that the education of my child will be guided by the instructors and other school officials. I agree that my purpose in obtaining a Christian education for my child will be achieved by following the curriculum set by the instructors. To that end, I agree that I will require my child to perform all duties and responsibilities entrusted to him by the instructors and school officials to the best of his/her ability to their satisfaction. I will support the decisions of the instructors and school officials and will never attempt to undermine their authority. I understand and agree that during my child's enrollment the courses offered and the instructors teaching them may change from time to time in the discretion of the school leadership.
- 5. I understand and agree that my child has no right to publish and distribute a student newsletter or any other publication. I understand and agree that *Full Life Christian Academy* has the right, in its sole discretion, to control what is published, circulated, or otherwise distributed at its school to its students or staff, and I will ensure that my child understands this provision.
- 6. I understand and agree that attending *Full Life Christian Academy* is a privilege and the school reserves the right to suspend or expel my child from the school in accordance with its official policies as determined by the school. Notwithstanding anything to the contrary contained herein, this Agreement does not bind either party to any specific period of enrollment. Either party may terminate this Agreement without cause upon seven (7) days written notice. I understand that no rights or presumptions of continued enrollment are conferred or implied by this Agreement or by a number of consecutive Agreements. I further agree that no right to notice of renewal or non-renewal of the Agreement is conferred or implied.
- 7. I agree to pay all tuition and fees in a timely manner as set forth in *Full Life Christian Academy*'s Financial Information Statement. I understand that monthly tuition payments are due on the first day of each month. I further understand that if I fail to make a timely payment, my child may be withdrawn from school and I may be subject to late payment fees and other costs, including any necessary costs of collection in accordance with school policy.
- 8. As *Full Life Christian Academy* is a Christian ministry organization, both parties agree that they would never make demands, threaten to sue, or actually litigate any matter whatsoever relating to or resulting from this Agreement. I understand that making demands, threatening to sue or actually litigating a matter against *Full Life Christian Academy* clearly violates Biblical teaching and practice and shall constitute sufficient grounds for immediate withdrawal of all my children from enrollment at *Full Life Christian Academy*. I understand that retaining or instructing an attorney to contact the ministry with regard to a potential claim or dispute will be interpreted as a threat to sue. Accordingly, the parties agree to resolve all potential claims, disputes or causes of action through binding arbitration using the procedures outlined in the attached procedures.
- a. I agree to follow the biblical pattern of Matthew 18:15-17 and Galatians 6:1 and always give a good report. All differences are to be resolved by utilizing Biblical principles—always presenting a <u>united front</u>.
- b. The parties agree that the methods outlined in this section (8) shall be the sole remedies for any and all controversies or claims arising out of the enrollment relationship or this Agreement and expressly waive their right to file a lawsuit against one another in any civil court for such disputes, except to enforce a legally binding arbitration decision.
- c. I acknowledge that I have read and understand the procedures for Arbitration adopted by *Full Life Christian Academy* and agree to abide by the procedures outlined therein.
- d. I agree to do everything in my power to avoid involving *Full Life Christian Academy* in any legal proceedings which may take place or legal requests for documents or testimony of school officials concerning the custody and/or education and upbringing of my child. I understand that if, in spite of my

and my attorney's best efforts, any school official is legally compelled to provide testimony or documentation beyond a copy of my child's standard academic records, that my child may be immediately terminated of enrollment from *Full Life Christian Academy* and that my account may be charged for any and all expenses incurred in complying with such legal process.

- 9. The parties agree that there are no other agreements or understandings between them relating to the subject matter of this Agreement. This Agreement supersedes all prior agreements, oral or written, between the parties and is intended as a complete and exclusive statement of the agreement of the parties. Neither this Agreement nor its execution have been induced by any reliance, representations, stipulations, warranties, agreements or understandings of any kind other than those expressed herein. If any provision of this agreement is found to be void or voidable, it shall not affect the validity of any other provision. Both parties shall remain bound by all other provisions.
- 10. I certify that I will explain this agreement and its meaning to my child. I will assist the school in every way necessary to ensure my child abides by all the terms of this agreement.
- 11. I understand that this Agreement shall not take effect until fully executed by all parties.

STATE OF:	COUNTY OF:
The forgoing was acknowledged before me on this	day of,
Notary	Public
My commission expires on:	
BY B	Υ
Mother	Father
I understand this agreement and its content and agree t	o abide by its terms and all rules which apply to students.
BY	
Student (Age 12 and above)	
ACCEPTED AND APPROVED BY ADMINISTRAT	OR Date

#### XIII. Student Behavior Contract

The following is a list of expectations which should be adhered to by all students while attending Full Life Christian Academy. We ask that students and their parents read the contract together:

• I understand that all Full Life Christian Academy staff and volunteers are in authority and that I will be respectful toward them in my speech, actions, and attitude.

• I will treat my fellow students kindly and be friendly toward all of them, to include: no put-downs, insults, or derogatory remarks; no gossiping or lying about others; respecting their persons by keeping my hands and feet to myself, etc.

• I will take care of all of my belongings, the belongings of other students, the building and property of Full Life Christian Academy, to include: cleaning up any messes that I make; keeping chairs flat on the floor; not writing on furniture or walls; not breaking pencils or erasers, etc.

• I will follow directives concerning the wearing of my uniform and will take responsibility to the extent for which I am able, to be dressed appropriately each day. This will include: keeping my athletic shoes tied, wearing only the allotted amount of jewelry, wearing socks that show above the shoe, remembering to wear my belt on a daily basis, wearing my logo shirt to class every day, and assisting my parents by making sure that I have a clean uniform for each day.

• I will be responsible for bringing my lunch, for not chewing gum or snacks during school, for completing all assignments given to me and turning them in on time, for having the correct school supplies on a daily basis, for acting appropriately on field trips and other school outings, and I agree to cooperate with any other requirements of Full Life Christian Academy as long as I remain a student of the school.

Parents, please initial in spaces allotted for understanding of the rules above.

\_\_\_\_\_ We have read the list of rules for expected behavior while attending Full Life Christian Academy and agree that they are appropriate.

\_\_\_\_\_ We will support the teachers and staff of Full Life Christian Academy and have discussed these rules at home and have agreed to comply with them while in attendance.

\_\_\_\_\_ We understand that our child may be disciplined by written assignments, loss of privileges, in or out of school suspensions or even appropriate physical exercise if he/she fails to comply with these rules.

\_\_\_\_\_ We understand that parents will be contacted, and a conference will be required if disobedience persists.

 Father's Signature
 Date
 Mother's Signature
 Date

 Legal Guardian's Signature
 Date
 Student's Signature
 Date

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## Full Life Christian Academy

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### **RECORDS REQUEST**

To Whom It May Concern:

Date: \_\_\_\_\_

The following student is enrolling at Full Life Christian Academy and all student records are requested to be sent to the above address via USPS or fax.

Student Name

Student Social Security Number

Parent Name (Printed)

Parent Signature

Representative requesting form (signature)

Previous school Attended

Contact Information for Previous school

\*Thank you so much for your timely response and cooperation! If you have any questions or concerns, please contact the office of Full Life Christian Academy at 228-588-2651.