

School Policy Contract 2017-2018

We affirm our commitment to the policies, procedures and statement of faith. It is our desire to work with the school administration for the welfare of our child(ren). We commit ourselves to cooperate with the school in this educational ministry. In recognition of this fact, we agree:

We will promptly pay all tuition, registration fees, day care fees, and any fees or charges as established by the school. We will pay all costs incurred by the school for collection of fees should such actions become necessary.

There are sports fees associated with all extracurricular organized sports. If my child chooses to participate in school sports, I will pay all costs associated with each chosen sport prior to my child playing.

Textbooks and workbooks that are provided by Wildwood Christian Academy are on loan for student use to enable optimum education to take place. It is your responsibility to take proper care of your books and to pay for the repair or replacement of these books, if any are lost or damaged.

Wildwood Christian Academy is authorized to provide religious instruction in accordance with the Statement of Faith and all biblical principles as interpreted by the leadership of Wildwood Calvary Chapel and WCA administration.

We understand that we have an obligation to be actively involved in the education of our child. We agree to uphold and support the high academic standards of the school by encouraging our child's study habits and ensuring that our child completes all homework and other assigned projects.

We will faithfully support the school through our prayers and positive attitudes and in keeping with the Matthew 18 principle- we will share any complaints only with the parties involved.

We understand that if, for any reason, our child does not respond favorably to the school, we will do everything in our power to cooperate with the school to help our child make the necessary adjustments. If their adjustments cannot be made, we then agree to quietly withdraw our child at the school's request.

We understand that assessments will be made to cover damages to the school, including breakage of windows, book damage, and abuse or misuse of other school or personal property.

We agree to notify WCA in writing if someone other than those listed on the emergency information section of this application will pick up our child.

We agree to support all school and classroom policies as set forth by the WCA administration, teaching staff, and the parent/ student handbook.

If any of the information in the student's admission application is found to be intentionally untrue WCA reserves the right not to enroll the student or dismiss the student from school.

We agree to have our child to school on time. Excessive tardies and absences may result in suspension and possibly removal from school.

When there is a reason to believe that a student is in danger or they themselves are a threat to another, administration shall notify the police so that the student might receive appropriate outside treatment and assessment. If the student's parents or legal guardian cannot be reached, this step can be taken without their permission. Administration may disclose personally identifiable information from the student's records to the appropriate party.

We understand and agree that continued and re-enrollment of my child at WCA is dependent on my parental support of the school, its staff and its policies.

WCA students, grade K-6, will appear in our annual yearbooks and/or school website. Group photos and video recording may be taken at school functions or extracurricular activities.

We understand that every effort will be made to protect and safeguard all students. Therefore, we agree not to hold Wildwood Calvary Chapel/ Wildwood Christian Academy liable for any illness or mishap that may occur to our child. I/ We will cooperate with the discipline policies as set forth by Wildwood Christian Academy, including the community service/ detention and other office referral programs. I/We wish to delegate to the school the responsibility of acting in *loco parentis* (in place of the parent) regarding the safety and welfare of the child named below during the hours school is in operation, either formally or informally in extra- curricular activities.

Student Name: _____

Contracting Parent's Signature (Father/ Mother/ Guardian):

Date:

Emergency Contact Information 2017-2018

Student's Name: _____

In Case of Emergency:

Mother's Name: _____ Phone number during school hours: _____

Father's Name: _____ Phone number during school hours: _____

In the event of an emergency, parents will always be contacted first. Should parents not be available, we will contact the names listed below. It is important to notify these persons in advance as to the possibility of assuming temporary care of your child. Please include people who live locally, who are available, and who will assume temporary care of your child if you cannot be reached. It is understood that your child may also be released to any of the person's listed below:

Emergency Contacts: (Minimum of one additional local contact is required)

1. _____ Name	_____	_____
_____	_____	_____
Home Phone	Work Phone	Cell Phone
2. _____ Name	_____	_____
_____	_____	_____
Home Phone	Work Phone	Cell Phone
3. _____ Name	_____	_____
_____	_____	_____
Home Phone	Work Phone	Cell Phone
4. _____ Name	_____	_____
_____	_____	_____
Home Phone	Work Phone	Cell Phone

I give permission for Tylenol to be given when needed by my child: YES / NO Initials _____

Please circle one, then initial blank

I give permission for Advil/ Motrin to be given when needed by my child: YES / NO Initials _____

Please circle one, then initial blank

I understand that the above emergency contact names are in effect as of the signing of this emergency information page. Changes to the emergency contacts for the 2017-2018 school year must be made in writing and forwarded to the school office. Initials _____

Parent Release:

As a parent or legal guardian, I authorize a licensed physician to examine the above named student, and in the event of an injury, to render such emergency care as he/she deems necessary for the treatment of such injury, including consultation and treatment by a specialist, including a surgeon. I father authorize the school authorities to send the above named student to the most accessible hospital or physician.

I will not hold Wildwood Christian Academy financially responsible for the emergency care and/ or transportation of said child. This authorization shall remain effective until the last day of the school year noted on the front of this application unless revoked in writing and delivered to Wildwood Christian Academy.

Parent/ Guardian Signature: _____ Date: _____