

Pre-Kindergarten Registration Enrollment Form

Please enroll the following child/children in Founders Christian School's Pre-Kindergarten class for the 2017-2018 school years. If you register before June 1st, the fee is \$85.00 per child. After June 1st, it is \$100.00 per child. All registration fees are non-refundable and must be turned in along with this form in order for your child to be enrolled. Enrollment is on a first come, first serve basis. Pre-Kindergarten tuition is \$200.00 a month.

Name		Age (as of 9/1/17)	DOB
		·	·
Parent's Name			FBC Member (yes/no)
Address		 City	 Zip Code
	 Email		



Pre-Kindergarten Enrollment Application

Child's Name Parents' Relationship to Each Other:		DOB			Sex
		☐ Married	☐ Divorced	☐ Separated	d 🛘 Single
(If divorced, a copy of the Di this form.)	vorce Decre	ee noting guara	lianship, days of	visitation, etc. n	ust accompany
Child lives with (Please chee	ck all that a	pply):			
☐ Mother and Father ☐	Mother	☐ Father ☐	Other		
Father's Name				Phone	
Address				Apt #	
City	_ ST	Zip	Subdiv	ision	
Occupation		Emplo	yer		
Work Phone	Ce	11	Emai	il	
Mother's Name				Phone	
Address				Apt #	
City	_ ST	Zip	Subdiv	ision	
Occupation		Emplo	yer		
Work Phone	Cell I		Emai	Email	
Siblings					
Name		A	ge	Grade	
Name	Age Grade				
Name	Age Grade				
Name					
Family religious preference _		Ch	urch Membershi	p	
How did you hear about our	school?				



Emergency Contact Information

List <u>at least</u> one local person who will be *available to assume responsibility for your child in an emergency <u>if parents</u> cannot be reached.*

Name		Relationship to Child			
Address			Apt #	City	
State	Zip	Phone		Cell	
Name			Relations	hip to Child	
Address			Apt #	City	
State	Zip	Phone		Cell	
Release of	Child (Other than)	parents and emerge	ency contacts	8)	
Name			Relations	hip to Child	
Address			Apt #	City	
State	Zip	Phone		Cell	
Name			Relations	hip to Child	
Address			Apt #	City	
State	Zip	Phone		Cell	
Additional I	nformation:				

MEDICAL INFORMATION FORM

Founders Christian School

Child's Name		DOB		Sex	
Father	P	PhoneCell_			
Mother	Pl	PhoneCel			
Address		City	ST	Zip	
ANALO DA EL CODIV		MG GWOT DE GODD		OLYPED	
AN UP TO DATE COPY			S MUST BE PR	ROVIDED.	
		EDICAL HISTORY ek all that apply)			
Asthma	Sinusitis	Bronchitis	K	idney trouble	
Diabetes	Dizziness	Hay Fever	H	leart trouble	
Stomach upset	Other				
ALLERGIES: (Add sympto	oms/medication give	en)			
•	C	•			
Food Medications (name)					
Insect stings/bites					
Poison sumac, oak or ivy _					
Other					
Previous operations or serio					
Any routine medications (li	ist):				
Special Diet					
		GL L			
Childhood diseases (check	all that apply):	Chickenpox	Measles	M umps	
Whooping Cough	Other				
Is there any evidence of:	Hearing loss or d	ifficulty?			
•	Vision difficulty?	·			
	Speech difficulty	?			
Additional comments or ex	planations				

EMERGENCY MEDICAL CARE

Founders Christian School

Child's Name	SS#			
	nake arrangements for emergency medical attention, I authorize ny child to an Emergency Room or to the following physician			
Doctor	Hospital			
	Phone			
	State Zip			
Special Instructions				
I/we hereby agree to hold Founders (Weekday Early Education and its agent, empharmless from any and all liability of any nat in consideration of the above, I/we further agagainst Founders Christian School, Founders for damages arising out of the aforementione Founders Christian School, Founders Baptist agents, employees, representatives, volunteer	Christian School, Founders Baptist Church, Founders Baptist Church oloyees, representatives, volunteers, members, successors and assigns ture which may arise out of or result from such participation. For an gree that in the event that said minor or I/we should make any claim is Baptist Church, Founders Baptist Church Weekday Early Education and activity, I/we will personally indemnify, defend and hold harmless t Church, Founders Baptist Church Weekday Early Education and its rs, members, successors and assigns against and all loss and damage dict received by me/us or said minor or my/our heirs, executors,			
(Signature of Parent or Guardian)	(Date)			
State of	County of			
This instrument was acknowledged before	re me on (date)			
(Signature of Notary Public)				

Field Trip Permission Form

Founders Christian School

It is necessary that this form remain on file for every child in our program. No child will be allowed to leave the school without parental permission.

I give my permission for		to go on any field
trip that is taken this year.	Yes	No
I am willing to help as a chaperon when needed.	Yes	No
I would be able to provide transportation for		children in my vehicle.
Parent's Signature	Date _	
Picture/Media Perm Founders Christian		rm
I GIVE Founders Christian School permission to ta	ake pictures fo	or class use. (memory
books, bulletin boards, gifts for parents, etc)	Yes	No
I GIVE Founders Christian School, Founders Bapti Church Weekday Early Education permission to us		-
(School/Church website, brochures/flyers, etc)		No
Parent's Signature		Date

FOUNDERS CHRISTIAN SCHOOL

Pre-K Uniform Guidelines and Order Form

Dress Code

A. Uniform Code/Dress Standards

Consistent with FCS standards, students' attire must at all times be neat, clean, in good repair, fit properly and in compliance with uniform code.

Students at Founders Christian School must purchase polo shirts, P.E. shirts and sweatshirts from the Founders Christian School store. Shorts, pants, skirts, skorts, scooters and jumpers must be khaki or black and may be purchased at retailer of your choice.

1. Uniform Code

The following outline shall be applied to Pre-Kindergarten students in determining the appropriate attire for a given day of school.

- a. Tuesdays (P.E. Day)
 - i. Girls Red FCS P.E. shirt, Khaki or black pants or shorts
 - ii. Boys Red FCS P.E. shirt, Khaki pants or shorts
- b. Tuesdays (Music Day
 - i. Girls Red, black or white FCS polo shirt with Khaki or black pants, shorts, skirt, skort, scooter or jumper
 - ii. Boys Red, black or white FCS polo shirt with Khaki or black pants or shorts

2. Dress Standards

The following dress standards apply to FCS students on all school days during regular school hours.

- a. Students are not to wear clothing that condones, promotes or glorifies immoral, illegal or anti-Christian products or philosophies.
- b. Skirts, scooters, skorts, jumpers and shorts must of modest length (*no more than two inches above the knee*)
- c. Girls should wear shorts under skirts and jumpers at all times
- d. Students should wear white or black socks. Girls may wear tights or leggings.
- e. Students should wear tennis or dress shoes and they are to be primarily of a solid color (white, black, brown or gray/silver)