



PATH CHRISTIAN Academy

"Put on the full armor of God, so that you may be able to stand your ground..." Ephesians 6:10-18

KINDERGARTEN – SIXTH GRADE TUITION AND FEE SCHEDULE August 15, 2018 – May 31, 2019

***Educational Material/Activities Fee: \$445.00 (If paid in full on or before July 1st) NONREFUNDABLE
\$500.00 (If paid after July 1st) NONREFUNDABLE
(\$100.00 of this fee due at time of registration)**

Educational Materials/Activity Fees must be paid in full on or before July 1st or the higher fee will be applied.

Late fees will apply after August 1st if all fees are not paid, unless prior written arrangements have been made with tuition manager).

NEW Student Registration Fee: \$100.00 one time only. NONREFUNDABLE (Due at time of registration)

The **Educational Material/Activities fee** covers yearly testing materials, consumable classroom, art and science supplies, curriculum, yearbook, memberships, insurance, student activities, field trips, and assemblies. (This does not include **Outdoor Education trips for 4th-6th grade**). The **New Student Registration fee** covers operational expenses, CUM request and new student enrollment paperwork, and entrance testing when applicable.

\$15.00 School shirt (required for off campus trips)

TUITION: Tuition is an **annual** fee which may be paid in nine or ten monthly payments. Monthly tuition payments and other monthly fees (i.e. daycare, etc.) are due at the first of each month beginning. Payment schedule must be pre-selected at the time of enrollment on the contract form.

1st Child	Per Year	\$5,500.00/yr
	Ten Monthly Payments (August-May)	\$550.00/mo
	Nine Monthly Payments (Sept-May)	\$611.00/mo

**We offer sibling discounts: 15% off for your 2nd Child, 25% off for your 3rd Child, 50% off for your 4th Child
(\$467.50) (\$412.50) (\$275.00)**

Annual tuition may be paid in full, *but* must be paid in full by August 1st to receive an additional 5% discount. You may choose to make monthly payments (please see the "Explanation of Payment Procedures" on the reverse side of this form). **In addition, there will be no reimbursement for tuition if it becomes necessary for you to drop your student from our school during the academic school year** (see "Withdrawal Procedure"). There are no partial month reimbursements for monthly program fees (i.e. day care, etc.).

LATE TUITION CHARGES: Ten percent of the total monthly tuition and day care (if applicable) will be charged if tuition is not paid by the 5th of the month. If there remains an unpaid balance as of the 10th of the month, your student may temporarily be suspended or dropped until all outstanding amounts due are paid in full unless other arrangements have been previously made with the tuition manager at P.C.A.

EXTENDED DAY CARE

Morning Day Care	6:00 AM – 8:00 AM	\$80.00 per month
Afternoon Day Care	3:30 PM – 6:00 PM	\$100.00 per month
Both AM & PM Day Care		\$150.00 per month
*Prearranged weekly rate	AM or PM	\$50.00 per week
*Prearranged daily rate (This situation should be rare and on an emergency basis only)		
AM Day Care \$10.00 per day, PM Day Care \$15.00 per day, arrangements made 24 hours in advance.		
*Students may not add daycare (by week or day) on weeks/days with minimum days scheduled.		

LATE PICK UP CHARGES: Daycare closes at 6:00 PM. Late parents of students in daycare will be charged \$10.00 for the first quarter hour and \$1.00 per minute after if their student remains on campus after 6:00 PM. Chronic lateness may result in dismissal from our daycare program.

Students not picked up 3:30 pm will be placed in the daycare program and will be charged \$10.00 the first quarter hour and \$1.00 per minute that they are in daycare unless prearranged (see extended daycare above).

EXPLANATION OF PAYMENT PROCEDURES

The school accounting is managed from our in-house accounting department. All monthly school payments must be paid directly to Path Christian Academy. Path Christian Academy (P.C.A.) allows a 5 day grace period for payments. All monthly school payments are **due on the 1st of each month and are late after the 5th of each month.** Payments received on the 6th will be assessed a late fee. There is no allowance made if the 5th of the month is on a weekend; a late fee will be assessed as of the 6th of the month. P.C.A. charges a 10% late fee for any payment received after the grace period (5th of the month) expires.

Please make all checks payable to: **P.C.A.** and
write your child's name on the memo of the check

There are two ways to make your payments to Path Christian Academy (P.C.A.):

1. **(PREFERRED)** Bring your payment directly to P.C.A. Place your payment in the payment drop box located in the hallway in preschool. Payments are collected each morning at 10:00 AM.
2. You may mail your payment to P.C.A. Please send it to:

P.C.A.
P.O. Box 769
Cypress, CA 90630

Your payment must arrive at the school by the 5th to avoid a late fee. If your payment is postmarked the 2nd or later and arrives after the 5th, it will be considered late and the fee will be assessed.

RETURNED CHECK POLICY

3. P.C.A. charges a \$25.00 fee for each returned check. Multiple returns result in multiple charges. Your account may have to be paid in cash or money order if there are returned checks against your account. If you have any questions concerning the above information, or any other financial policies, please feel free to contact the accounting office (714) 236-1293

PATH CHRISTIAN ACADEMY
2018-2019 ELEMENTARY ENROLLMENT PACKET

Student's name: _____ Grade Entering: _____

Returning student: _____

REGISTRATION CHECK LIST

This packet includes registration materials, and information about tuition, registration, book use and day care fees. In order to enroll your child at P.C.A. the registration fee must accompany the completed registration packet. If you have any questions, please call the school office at (714) 236-1293.

NEW STUDENT COMPLETES ALL

***RETURNING STUDENT COMPLETES**

Parents: Please initial each line as you read and/or fill out each form.

- _____ Elementary Parent Handbook*
- _____ Tuition and Fee Schedule*
- _____ Explanation of Payment Procedures*
- _____ Statement of Faith*
- _____ Statement of Purpose
- _____ Pastor's Questionnaire
- _____ Elementary School Contract *
- _____ Payment Plans*
- _____ Non-prescriptive Medication Authorization
- _____ Legal Custody Letter
- _____ Photo Release Form
- _____ T-Shirt Order Form
- _____ Physicians Report (for students entering the 1st grade only) *
- _____ Immunization Record (updated)*
- _____ Birth Certificate
- _____ Student Information Card/Health Release

I hereby acknowledge that I have read, understood and completed all the above registration materials and that I have received, read and understood and will abide by the Elementary Handbook as well as my financial responsibilities to P.C.A.

Signature of Parent / Guardian

Signature of Parent / Guardian

Date

FOR OFFICE USE ONLY:

New students: _____ *All students: _____ *Tuition Database

_____ Cumulative request sent _____ Last report card _____ *Data Base _____ *T-Shirt received

_____ 1st _____ 2nd _____ SAT Score _____ *Cum Update/ Made _____ *Start date

Family Name: _____

SPIRITUAL AND CHURCH LIFE INFORMATION

What church does your family attend? _____

Do you attend regularly? _____

	Every Sunday	Occasionally	Seldom	Never
Father's Name _____	_____	_____	_____	_____
Mother's Name _____	_____	_____	_____	_____
Student's Name _____	_____	_____	_____	_____
Student's Name _____	_____	_____	_____	_____
Student's Name _____	_____	_____	_____	_____

How are you as parents involved in church activities other than attending worship services? _____

In what way is your home a Christian home? _____

How are your children involved in church activities other than worship services? _____

Please give a statement of your personal Christian faith: _____

Why do you wish to have your child enrolled in this school? _____

PATH CHRISTIAN ACADEMY
STATEMENT OF FAITH

The items below are from the Path Christian Academy Articles of Incorporation. They represent core doctrinal views of the church. Path Christian Academy, as a branch of that ministry, affirms these beliefs as stated below. As such the parents and students must also acknowledge these doctrinal and theological views.

Accordingly, parents and students of Path Christian Academy must know that these doctrinal views are to be taught accordingly when they are addressed in the curriculum. Personal views which run contrary to those stated below are incompatible to our stated ministry goals and we reserve the right to discontinue contractual obligations of or to parents and students, should those differences become a matter of contention.

We desire our parents and students to hold these values and understand these doctrines for themselves. We realize with age and maturity these matters will become more understandable. Any teaching about these matters will be age appropriate and in line with curriculum. It is our hope that they are also reinforced at home, thus our entire reason for providing the ministry of this school is to provide education based upon these common beliefs. Rejecting the essentials of these beliefs and doctrines may lead to dissent and lack of unity which exists everywhere outside of the faith. Our intent is to preserve unity based upon shared doctrinal and theological views, thus we request you carefully read, acknowledge and affirm, individually, each item below.

Please initial next to each statement that you have read and understand where Path Christian Academy stands on these relevant issues.

1. We believe that there is one living and true GOD, eternally existing in three persons: The Father, the Son, and the Holy Spirit, equal in power and glory; that this triune God created all, upholds all, and governs all things. (Genesis 1:1; Deuteronomy 6:4; Isaiah 44:8 and 48:16; Matthew 28:19-20; John 10:30; Hebrews 1:3)

Initial _____

2. We believe that the scriptures of the Old and New Testaments are the Word of God, fully inspired without error and the infallible rule of faith and practice. The Word of God is the foundation upon which this church operates and is the basis for which this church is governed. We believe that the Word of God supersedes any earthly law that is contrary to the Holy Scriptures. We believe that the King James Version of the Bible is the most accurate translation from the original ancient text. It is from this translation that we establish our doctrine and Statement of Faith. (Isaiah 28:13; Nehemiah 8:8; John 17:17; 2 Timothy 3:16-17; Hebrews 4:12; 1 Peter 1:23-25; 2 Peter 1:3-4 and 1:21)

Initial _____

3. We believe in the person of God the Father, an infinite, eternal, personal Spirit, perfect in holiness, wisdom, power and love; that He concerns Himself mercifully in the affairs of men; that He hears and answers prayer; and that He saves from sin and death all those who come to Him through Jesus Christ. (Deuteronomy 33:27; Psalms 90:2; Psalms 102:27; John 3:16 and 4:24; 1 Timothy 1:17; Titus 1:3)

Initial _____

4. We believe in the person of Jesus Christ, God's only begotten Son, conceived by the Holy Spirit. We believe in His virgin birth, sinless life, miracles and teachings, His substitutionary atoning death, bodily resurrection, ascension into heaven, perpetual intercession for His people and personal, visible return to earth. (Isaiah 7:14; Micah 5:2; Matthew 1:23; Mark 16:19; Luke 1:34-35; John 1:1-2, 8:58 and 11:25; 1 Corinthians 15:3-4; 1 Timothy 3:16; Hebrews 1:8; 1 John 1:2; Revelation 1:8)

Initial _____

5. We believe in the person of the Holy Spirit, Who came forth from the Father and Son to convict the world of sin, righteousness, and judgment, and to regenerate, sanctify and empower for ministry all who believe in Christ; (Acts 1:8; 2 Corinthians 3:18; John 16:8-11; Romans 8:26 and 15:13,16; Hebrews 9:14)

Initial _____

6. We believe the Holy Spirit indwells every believer in Jesus Christ and that He is an abiding helper, teacher, and guide. (John 6:13, 14:16-17 and 16:8-11; Romans 8:26)
Initial _____
7. We believe in the present ministry of the Holy Spirit and in the exercise of all Biblical gifts of the Spirit according to the instructions given to us in 1 Corinthians 12-14. (1 Corinthians 14)
Initial _____
8. We believe that all people are sinners by nature and, therefore, are under condemnation; that God saves and regenerates based upon faith by the Holy Spirit, those who repent of their sins and confess Jesus Christ as Lord. (Acts 8:15-17; Ephesians 2:1-3 and 8-9; Romans 3:23 and 5:8; Titus 3:5)
Initial _____
9. We believe Sanctification is part of the Christian life and is ongoing and demonstrable. We further believe that demonstrating that changed life is incumbent on every believer not as a work of the flesh, but of the Spirit. As such, believers should make it their practice to display holy conduct and not bring reproach against their professed beliefs or The God whom they represent. This includes but is not limited to participation in public actions, social networking, internet based programs and moral or spiritual compromise. (Deuteronomy 18:9-14; Romans 13:11-14; Galatians 5:13, 16; Philippians 4:8-9; I Timothy 4:12; II Peter 1:3-11; II Peter 3:11)
Initial _____
10. We believe in the universal church, the living spiritual body, of which Christ is the head and all who are born again are a part of the Body of Christ. (1 Corinthians 12:12-13; Ephesians 4:15-16; John 3:1-21)
Initial _____
11. We believe that the Lord Jesus Christ instituted two ordinances for the church: (a) full immersion water baptism of believers, and (b) the Lord's Supper. (Matthew 28:19; Luke 22:19-20; Acts 2:38; 1 Corinthians 11:23-26) We also believe that the Lord Jesus Christ validated the ordinance of marriage. (Matthew 19:4-5 and John 2:1-11)
Initial _____
12. We believe in the Second Coming of Jesus Christ which is His personal, visible return to earth and the establishment of His millennial kingdom, in the resurrection of the body, the final judgment and eternal blessing of the righteous and endless separation of the wicked. (Matthew 16:27; Acts 1:11; Revelation 19:11-16, 20:11-15)
Initial _____
13. We believe in a literal Heaven and a literal Hell and that all those who place their faith, hope and trust in Jesus Christ will spend eternity in Heaven with the Lord, while those who reject Jesus' free gift of salvation will spend eternity separated from the Lord. (Psalm 9:17; Matthew 5:3, 5:22, 18:9 and 25:31-34; Mark 9:42-49; Luke 12:5; John 3:18; Hebrews 12:23; 1 Peter 1:4; Revelation 14:10-11 and 20:11-15)
Initial _____
14. We believe in the Pre-Tribulation Rapture of the Church where all believers will meet the Lord in the air and be taken out of this world prior to the Tribulation that will come upon the earth. (Isaiah 26:20; Matthew 24:29-31; Luke 21:36; Romans 1:18, 5:9; 1 Thessalonians 1:10, 4:13-16 and 5:9; 2 Peter 2:7-9; Revelation 3:10, 5:7-10 and 7:13-14)
Initial _____
15. We believe in the God granted restoration of the nation of Israel to their ancestral land and right to govern the land God gave to them. Therefore we reject the doctrine of Replacement Theology (Supersessionism) and maintain that God is fulfilling His Covenant with Israel as scripture records. (Genesis 12:1-3, 15:18; Joshua 1:3-6; Jeremiah 30:3; Hosea 1:10-11; Zechariah 8:13)
Initial _____

16. We believe in the creation and God as the Creator. We believe that God created man and that He created them male and female. As such He created them different so as to complement and complete each other. God instituted monogamous marriage between male and female as the foundation of the family and the basic structure of human society. For this reason homosexuality, and all other “sexual preferences” or “orientations” are unnatural, sinful, and unacceptable to God. Accordingly, this ministry will not condone or recognize such same-sex marriages, civil unions, or domestic partnerships even if the state passes laws that provide for recognition of such unions. Initial _____

17. We believe that marriage is exclusively the legal union of one genetically born male and one genetically born female sanctioned by the state and evidenced by a marriage ceremony. We also believe that legitimate biblical sexual relations are exercised solely within marriage. Hence, sexual activities such as, but not limited to, adultery, fornication, pre-marital sex, incest, polygamy, homosexuality, transgenderism, bisexuality, cross-dressing, pedophilia and bestiality are inconsistent with the teachings of the Bible and the Church. Further, lascivious behavior, the creation, viewing and/or distribution of pornography and efforts to alter one’s physical gender or gender related appearance are incompatible with a true biblical witness. (Genesis 2:24; Matthew 19:4-6; John 4:16-18; Romans 1:18-32; I Corinthians 5:11, 6:9-11, 6:18-20, 7:1-3 and 7:8-9; Galatians 5:19-21; Ephesians 5:3-7; 1 Timothy 1:9-11) Initial _____

Student Name(s)

Parent’s Signature

Date

STATEMENT OF PURPOSE

*Train up a child in the way he should go, and when he is old he will not depart from it.
Proverbs 22:6*

Our educational program deals with each student's spiritual, intellectual, cultural, physical, and artistic needs. We attempt to equip Christian young people with a biblical view of life and train them for a life of service to God. Our goal is to help them grow, "in wisdom, in stature, and in favor with God and man" (Luke 2:52) with Christ as the example.

Path Christian Academy functions in cooperation with the home and church in providing a Christ-centered education. It is our desire to promote a strong relationship between family, church, and school.

Because we believe that all children are created in the image of God and are placed on earth to serve God and our fellow man, we, therefore, do not discriminate on the basis of gender, race, color, or national origin.

Our objectives for Christian education are as follows:

- To teach that the Lord Jesus Christ is the Son of God who came to earth to die for our sins and that it is necessary to be born again by the Spirit of God, by receiving the Lord Jesus Christ
- To teach that growth in the Christian life depends upon an intimate fellowship with God through reading the Bible and through prayer
- To provide the student with the skills and knowledge necessary to achieve academic excellence, thereby bringing glory to Jesus Christ
- To provide motivating and challenging experiences that will develop the creative skills, the talents and the abilities that the Lord has placed into each student.
- To teach the student his/her civic responsibility and to prepare him/her for adult responsibility as a citizen of our nation and as a citizen of heaven

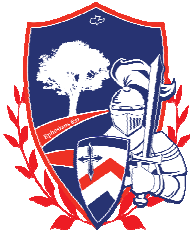
Our expectations for all school families:

- To have an active church life
- To support the school's standards, policies and procedures and work together with it to provide Christian growth
- To support the school in prayer and by being active in school affairs and functions
- To faithfully meet all financial obligations

By signing this application I indicate agreement with the Statement of Faith and Statement of Purpose of Path Christian Academy. I agree to fully support the church board, administration, and faculty in implementing Christian education.

Signature of both parents or guardians:

Date: _____



PATH CHRISTIAN Academy

"Put on the full armor of God, so that...you may be able to stand...on our ground..." Ephesians 6:10-18

PASTOR'S QUESTIONNAIRE

Parents: please fill out the following and make an appointment with your Pastor.

Student's name Grade

Parent's name Phone Number

Address City Zip

Church City Zip

Pastor:

Please read and answer the following questions:

The parents listed above have applied for acceptance into our school. It is our desire to work with you in a total evaluation of them prior to being accepted. Would you therefore aid us by answering the brief questionnaire below? In this way, we will gain more insight into the family in question. Please feel free to make a copy of this questionnaire prior to returning it to us and to share its contents with the family, if you so desire.

-
1. Do you personally know the student/parent(s)?
 2. Has the student/parent(s) been in attendance for more than one year?
 3. Has their attendance been _____ 1, _____ 2, _____ 3-4, _____ 5-10, _____ 11 or more Services per month?
 4. Is the student/parent(s) active in the work of the church? If yes, please explain: _____

 5. Based upon your personal knowledge of the student/parent(s) in question, would you recommend them to us?
_____ Yes, _____ No If no, please explain: _____

Pastor's Signature

Pastor's Daytime Phone Number

Date

Please return to:

Path Christian Academy
P.O. Box 769
Cypress, CA 90630

PATH CHRISTIAN ACADEMY
ELEMENTARY PROGRAM CONTRACT 2018-2019

(Student's last name) (Student's first name) (Student's birthday) (Grade)
PLEASE GIVE THE NAME(S) YOU WANT ON THE ACCOUNT:

(Family last name) (Father's name) (Mother's name)

(Father's employer) (Phone) (Mother's employer) (Phone)

Primary Email Address: _____

IF MY CHILD IS ACCEPTED FOR ENROLLMENT, I AGREE TO THE FOLLOWING: (PLEASE INITIAL EACH ITEM)

- ____ 1. **I acknowledge and agree to abide by all the policies outlined in the Elementary Parent Handbook.**
- ____ 2. I understand that I am obligated to pay and will pay the **full annual** tuition (which may be paid in 9/ 10 months) plus all day care fees and other charges as established by the school. (See "Tuition and Fee Schedule" regarding registration, tuition and day care). I will pay all costs, including legal fees, court costs, and attorney fees incurred by the school for collection of fees/tuition should such actions become necessary.
- ____ 3. **I understand that all Educational Material/Activities Fees are nonrefundable, due at the time of enrollment and I am obligated to pay these fees in full before May 1st of the contracted school year if payment arrangements are made.**
- ____ 4. I understand that if there remains an unpaid balance as of the **10th of the month**, my student may be temporarily suspended or dropped until all outstanding amounts due are paid in full unless other arrangements have been made previously with the accounting office at P.C.A.
- ____ 5. I understand the "Admission and Withdrawal Procedures". (See "Admission and Withdrawal Procedures" in the Elementary Parent Handbook.)
- ____ 6. Path Christian Academy (P.C.A.) is authorized to provide religious instruction in accordance with the Statement of Faith and all Biblical principles found in the Bible as interpreted by Path Christian Academy.
- ____ 7. The faculty and staff shall have complete control of my student and shall be authorized to employ such discipline as is deemed wise and expedient and as outlined in the Elementary Parent Handbook.
- ____ 8. My child will be picked up by 6:00 PM when they are enrolled in PM Day care. (Late parents of students in day care will be charged \$10.00 the first quarter hour that their student remains on campus after 6:00 PM and \$1.00 per minute thereafter). Chronic lateness may result in dismissal from the day care program. Students not picked up by a parent/authorized adult who remains unreachable by 7:00 PM will be considered abandoned and taken to the Cypress Police Station.
- ____ 9. My student will be picked up by 3:30 PM when they are not enrolled in PM Day care. (Students not picked up by 3:30 PM will be placed in daycare and will be charged \$10.00 the first quarter hour and \$1.00 per minute thereafter). Chronic lateness may show a need for your student to be enrolled in our day care program).
- ____ 10. On **Minimum Days**, if my student is not enrolled in the PM Daycare program I will pick them up at 12:30 PM. (Students not picked up by 12:30 PM will be placed in daycare and will be charged \$10.00 the first quarter hour and \$1.00 per minute thereafter).
***Students may not add daycare (by week or day) on weeks/days with minimum days scheduled.**
- ____ 11. I will notify P.C.A. in writing or by phone if my student will be picked up by someone other than the authorized adults listed on the Emergency Information Cards. (Refer to "Student Release Procedure" in the Elementary Parent Handbook.)
- ____ 12. I will give a **one month notice** regarding any changes in my student's enrollment in any monthly program offered by P.C.A. (See "Extended Day Care" in the Elementary Parent Handbook). I understand that I am **fully responsible for all charges up to and Through my one month notice. I am responsible for all reg/curriculum fees still pending at the time of the notice.**
- ____ 13. I will notify P.C.A. in writing of all changes to the information contained in this registration packet (i.e. changes in phone numbers, Addresses, including email address, enrollment status, custody etc.)
- ____ 14. I understand that P.C.A.. may drop my student if parent and/or student behavior and/or academic expectations described in the parent Handbook are not being met.

Signatures of both parents/guardians:

Date: _____

Date: _____

PAYMENT PLANS

Educational Material/Activities Fee: \$445.00 (If paid in full on or before July 1st) NONREFUNDABLE
\$500.00 (If paid after July 1st) NONREFUNDABLE
(\$100.00 of this fee DUE AT TIME OF REGISTRATION)

***Educational Materials/Activity Fees must be paid in full by July 1st or the higher fee will be applied.**

NEW Student Registration Fee: \$100.00 one time only. NONREFUNDABLE (Due at time of registration)

NEW STUDENT FEE: \$100.00 Check # _____ CASH _____

EDUCATIONAL MATERIAL FEE PLAN:
PLEASE INITIAL EACH APPROPRIATE LINE:

On or before July 1st

_____ **\$100.00 (Deposit due at time of registration)** Check # _____ CASH _____

_____ **If paid before July 1st** Balance of \$345.00 1 Payment: _____ Check # _____ CASH _____

Paid after July 1st

_____ **\$100.00 (Deposit due at time of registration)** Check # /CASH _____ Date: _____

_____ Balance of \$395.00 (1 Payment) Check # /CASH _____ Date: _____

_____ Balance of 2 payments of \$197.50 each. Check # /CASH _____ Date: _____
Check # /CASH _____ Date: _____

_____ Balance of 10 Payments of \$39.50 each per month **August – May**

_____ Balance of 9 Payments of \$43.88 each month **September- May**

I understand that I will be liable for the entire amount of my Educational Material/Activities Fees if I choose to drop my child before the conclusion of my payment arrangement.

Signature

Date

***Late fees will apply after August 1st if all fees are not paid, unless prior written arrangements have been made with tuition manager).**

TUITION PAYMENT PLAN:
PLEASE INITIAL EACH APPROPRIATE LINE

_____ **1 PAYMENT (5% DISCOUNT) Must be paid by August 1st 2018** Date Paid _____ Check #/CASH _____

_____ **10 PAYMENTS August 2018 – May 2019 (\$550.00 per month)**

_____ **9 PAYMENTS September 2018 – May 2019 (\$611.00 per month)**

FOR OFFICE USE ONLY:

_____ Reg Office
_____ Interview/ Testing Date
_____ Start Date

_____ Daycare – AM PM AM-PM
_____ Disc Applies- 1st 2nd 3rd 4th Sibling: PRESCH ELEM

**SCHOOL POLICY FOR ADMINISTRATION OF
PRESCRIPTION AND NON-PRESCRIPTIVE MEDICINE**

The law allows any person to assist in carrying out a physician's recommendation. The school recognizes the desirability of following a physician's recommendation as closely as possible during school. The fact that this is a service or accommodation which the school is not legally required to perform is recognized by all parties signing this form, and in so signing they agree to hold the school and/or its personnel free from any or all law suits and legal claims which might arise out of these arrangements.

**PARENT RELEASE FOR ADMINISTRATION OF
PRESCRIPTION AND NON-PRESCRIPTIVE MEDICINE**

It is understood that the school is not legally obligated to administer medication to my student and therefore, I agree to hold the school and its employees free from any and all responsibility for the results of such medication or the manner in which it is administered, and to indemnify each of them against loss by any reason of any civil judgment arising out of these arrangements which may be rendered against them.

We, the undersigned, who are parents of _____ request that medicine be administered to our student in accordance with our instructions by a member of the school staff.

Signature of Parent or Legal Guardian Date Signature of Parent or Legal Guardian Date

MEDICATION DURING SCHOOL HOURS

If medication needs to be taken during school hours the following procedures must be followed:

1. All medication requires a signed release from the parent for school personnel to administer the medication. Prescriptive medicines require a specific signed release form which may be obtained in the school office or from the day care aide.
2. All medication must be brought to the school office by an adult (i.e. parent or day care aide).
No student may carry any medication on their person or in their belongings.
3. Aspirin-free pain reliever (i.e. Tylenol) may be administered to the student if deemed necessary by the office staff, if parental consent is on file, and parent is notified by phone prior to administering.
4. No medication will be given to any student unless it is in the original bottle/box on which it states that it is age appropriate for that child. Prescribed medicine must be in the prescription bottle and have the child's name on it.

LEGAL CUSTODY LETTER RELEASE OF LIABILITY

To whom it may concern,

Please be informed that Path Christian Academy does not have the legal authority to prohibit or restrict the natural parent's access to a student's records or physical contact with that student in relationship to a custody case unless the legal papers are on file with the school office. The school can only carry out the instructions specified in the final custody papers, divorce decree, court order or restraining order.

If there are conditions which prohibit either natural parent from physical custody of the student, it is the responsibility of the parent who has legal custody to provide the school with the PROPER PAPERS.

Signature of Both Parents or Legal Guardians

Date

Signature of Both Parents or Legal Guardians

Date

Office Use Only

CI/NPC/PR

Student Information Card

Grade: / Rm:	Start Date:
Gender:	Birth Date:

Student's Name: _____
 (Last Name) (First Name) (Middle Name)

Primary Contact Person _____ Secondary Contact Person _____

Father's Information
Name:
Daytime Phone:
Cell Phone:

Mother's Information
Name:
Daytime Phone:
Cell Phone:

Step - Parent Information
Name:
Daytime Phone:
Cell Phone:

List any SPECIAL CIRCUMSTANCES AND/OR CUSTODY problems:

PRIMARY EMAIL:

PRIMARY MAILING ADDRESS:

Street: _____

City: _____

Zip Code: _____

Marital Status: Married _____ Divorced _____ Widowed _____ Separated _____ Single Parent _____ Remarried _____

School Last Attended: _____
 Name Address

Church in which parents are members/regularly attend: _____

Do you want your phone number available to other parents: YES / NO

Has your child ever been suspended from school or placed on probation? YES NO explain: _____

Are there special needs or circumstances that we should be aware of? _____

List authorized adults (18 years or older) to whom your child may be released to in case of an EMERGENCY OR ILLNESS if parent is unable to be reached. (Must list at least 2 names).

Name	Daytime #	Cell #	Relationship

PLEASE FILL IN THE FOLLOWING INFORMATION FOR THE STUDENT'S PROTECTION

(Circle one)

1. Does the student have a health problem? Yes No
 If yes, please specify: Allergy, asthma, wears glasses, hearing problem, diabetes, epilepsy, bee sting sensitive, rheumatic fever, prosthesis, or other: _____
2. Does the student take daily medication? Yes No
 At school? Yes No _____
 At home? Yes No _____

You must fill out a medication release form for any medication given at school. Forms may be obtained from the school office or day care aide.

3. Allergies and sensitivities: Is there a history of skin or other reactions or sickness following injection or oral administration of: (Circle one) What
 Penicillin or other antibiotics Yes No _____
 Morphine, Codeine, Demerol or other Yes No _____
 Novocain or other anesthetics Yes No _____
 Aspirin, or other pain remedies Yes No _____
 Sulfa drugs Yes No _____
 Tetanus antitoxin or other serums Yes No _____
 Any other drug or medication Yes No _____

4. Drugs taken recently: Within the past six months has the student taken: (Circle if Yes)
 Cortisone, ACTH, Anticoagulants, Tranquilizers, Hypertensive's (high blood pressure)

5. Has the student ever received treatment for Asthma, Rheumatism, or Rheumatic Fever?
 Yes No (Circle one)

DOCTOR'S INFORMATION

Name: _____ Phone Number: _____

Insurance Co. _____ Policy # _____

AUTHORIZATION TO CONSENT TO TREATMENT

I/We, the parent(s)/guardian(s) of _____ hereby authorize Path Christian Academy as agents for the undersigned to consent to any x-ray examination, anesthetic, medical or surgical diagnosis, treatment, and/or hospital care which is deemed advisable by, and is rendered under the general supervision of any physician or surgeon licensed under the provision of the Medical Practice Act or the medical staff of a licensed hospital, whether such diagnosis or treatment is rendered at the office of said physician or at said hospital.

It is understood that this authorization is given in advance of any specific diagnosis, treatment, or hospital care being required. Authorization is hereby given to Path Christian Academy personnel to administer first-aid treatment during school activities or to call the paramedics, or rescue squad, as deemed necessary. This authorization is given pursuant to the provisions of Section 25.8 of the Civil Code of California.

Should there be any changes in your student's health history, it is the parent's responsibility to notify P.C.A. immediately in writing of those changes.

 Signature of Both Parents or Guardians

 Daytime Phone Date