



Life Way Christian School

351 W. Centerton Blvd. • Centerton, Arkansas 72719
479-795-9322 • www.lwcsar.com

In consideration of the acceptance of this enrollment contract by Life Way Christian School, Inc., the parent or legal guardian (hereinafter “the Responsible Party”) agrees with LWCS as follows:

Registration Fee: In order to secure enrollment, the Responsible Party agrees to pay and deliver with this Enrollment Contract the registration fee. Once paid, this registration fee is **NON REFUNDABLE**.

Tuition: Full tuition is due no later than the first week of August or payable in monthly option plans. If paying monthly, tuition is due by the 1st of the month. Tuition is considered late after the 10th and your account will be accessed a late fee of \$15.00. I have read the current Tuition and Fee Schedule and I agree to be bound by said terms and conditions.

School Policies: I understand that in signing this enrollment contract, I am agreeing to accept the rules and regulations of the school as stated in the current handbook. The school reserves the right to dismiss any student who academically or behaviorally proves not to be in harmony with the school standards or policies. This applies as well to conduct taking place outside the school’s jurisdiction which nonetheless suggests the student may not be a desirable member of the school community or which reflects adversely on the school’s reputation. Furthermore, I agree to the policy that student transcripts will not be released unless the student’s account is paid current.

Immunization Policy: In order to ensure the health of all our students, it is critical that each student receive proper immunizations required by law. If at any point during the school year it is determined that a student is in need of an immunization, he/she will be unable to attend school until it is administered.

Withdrawal Policy: Life Way operates entirely on the tuition and fees received from families and the generous support of families and First Baptist Church of Centerton. It is understood that throughout the year a family may choose to withdraw due to reluctant financial, academic or behavioral issues. Life Way asks that families give a two week notice for all withdrawals. Withdrawal fee equal to two weeks tuition will be assessed for any early withdrawal during the school year. Parents must complete an official withdrawal form.

Student Image/Information Use: Parent understands that their child (ren)’s likeness may be photographed or videotaped by the school in the course of school activities. These pictures may appear on LWCS’s website, in the local newspaper, in the school yearbook, on television and/or in the school newsletter, etc. on different occasions for promotional and/or advertising purposes. By signing this contract you are giving approval for your child’s image to be used for these reasons. If you do not want your child’s image to be used for these reasons, please check the box below:

NO, Parent **DOES NOT** give consent for picture/videos of their child(ren) to be used for promotional and/or advertising materials, or in the school yearbook.

Internet Use: Parent gives his/her permission for their child(ren) to use the internet as provided by Life Way Christian School. Students will, at times, use the internet for research to library sites and organizations that will enhance their learning and to meet the goals of our curriculum within the context of our mission statement. Parent also understands that though the internet offers access to a wealth of resources, it also contains ideas, points of view and images that are inappropriate. LWCS integrates technology protection measures to filter and block this inappropriate content. Parent understands, however, that it is impossible to block access to all inappropriate content. Parent agrees to hold LWCS and its employees harmless for any consequences resulting from the use of the internet. Parent further understands that LWCS will assume no cost, liability or damage caused by the use of the internet access.

Medical Release: The undersigned, being the Parent or Guardian of a child enrolled in Life Way Christian School, hereby declares that in the event of a medical emergency involving my child, if reasonable efforts to reach me are not successful and if, in the opinion of a properly licensed and practicing physician, my child needs medical or surgical treatment which would otherwise require my consent, Life Way Christian School, acting by and through its employees, is hereby authorized to act as my agent to give authorization or consent for such treatment to my child; and I hereby release any doctor, hospital or other provider of such emergency medical or surgical services from any liability which may otherwise occur as a result of providing such services in reliance upon this Authorization and Consent; and that any such person or entity may rely upon a photocopy of this Authorization and Consent as being fully effective and binding upon me as if it were an executed original. I further consent to the transportation of my child for emergency treatment.

School Trips Waiver: I agree and do hereby release and discharge Life Way Christian School, Inc. and any teacher, employee or other person in charge of school sponsored activities from all claims, present and future, known and unknown, in any manner arising out of the described activity for each trip. I further understand and agree that this release shall hold Life Way Christian School and any teacher, employee or other person engaged in the school sponsored trip harmless from any and all liability to my children and further, I agree to hold them harmless from any loss of property to my children that may occur during the trip activities.

The undersigned agrees to release and hold harmless the school, its agents and employees from all claims, damages, or other liabilities for injury to my children, which are not the result of gross negligence by the school, its agents or employees. The undersigned also agrees to indemnify the school for damages by my children. To protect the health and safety of each student, I have completed the medical information on this contract and have indicated any restrictions which should be placed on my children's participation in competitive sports and/or activities. I agree to keep my children's medical information current via the Parents Web.

I certify that no information relevant to my children's application has been withheld and agree to the terms of this application and to the policy of the school. I understand that acceptance of this application by Life Way Christian School in no way guarantees enrollment. All applicants are considered in accordance with the official admission policy, and final decision will be made by the Admission Committee representing the administration of Life Way Christian School.

BOTH PARENTS MUST SIGN

Signature/Parent or Legal Guardian Date:

Print Name

Signature/Parent or Legal Guardian

Print Name

Address

City, State, Zip Code

Telephone

Signature/Person Responsible for Fees (if different)

Print Name

Address

City, State, Zip Code

Telephone

Student Names and Grades:

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____