

OFFICE USE	Date Received ___/___/___	Rec'd by: _____	<input type="checkbox"/> Cash \$ _____ <input type="checkbox"/> Check # _____ \$ Amount _____ <input type="checkbox"/> Online EFT Auth # _____ \$ _____
<input type="checkbox"/> New Student <input type="checkbox"/> Re-Enrollment	Enrollment Start Date: _____		

ALL GOD'S CHILDREN CHRISTIAN SCHOOL 2018-2019 ELEMENTARY CONTRACT REGISTRATION FORM

This agreement is between All God's Children Christian School and _____ for the elementary education of
 Parent's Name _____

<input type="checkbox"/> 1st Child _____ <input type="checkbox"/> 2nd Sibling _____ <input type="checkbox"/> 3rd Sibling _____	<table style="width: 100%; border: none;"> <tr> <td style="width: 10%;"><input type="checkbox"/> K</td> <td style="width: 10%;"><input type="checkbox"/> 1st</td> <td style="width: 10%;"><input type="checkbox"/> 2nd</td> <td style="width: 10%;"><input type="checkbox"/> 3rd</td> <td style="width: 10%;"><input type="checkbox"/> 4th</td> <td style="width: 10%;"><input type="checkbox"/> 5th</td> <td style="width: 40%;">Child's Date of Birth ___/___/___</td> </tr> <tr> <td colspan="6">Registration Fee \$100 + Materials Fee \$300 =</td> <td><input type="checkbox"/> Total Fee \$400</td> </tr> </table> <table style="width: 100%; border: none;"> <tr> <td style="width: 10%;"><input type="checkbox"/> K</td> <td style="width: 10%;"><input type="checkbox"/> 1st</td> <td style="width: 10%;"><input type="checkbox"/> 2nd</td> <td style="width: 10%;"><input type="checkbox"/> 3rd</td> <td style="width: 10%;"><input type="checkbox"/> 4th</td> <td style="width: 10%;"><input type="checkbox"/> 5th</td> <td style="width: 40%;">Child's Date of Birth ___/___/___</td> </tr> <tr> <td colspan="6">Registration Fee \$50 + Materials Fee \$250 =</td> <td><input type="checkbox"/> Total Fee \$300</td> </tr> </table> <table style="width: 100%; border: none;"> <tr> <td style="width: 10%;"><input type="checkbox"/> K</td> <td style="width: 10%;"><input type="checkbox"/> 1st</td> <td style="width: 10%;"><input type="checkbox"/> 2nd</td> <td style="width: 10%;"><input type="checkbox"/> 3rd</td> <td style="width: 10%;"><input type="checkbox"/> 4th</td> <td style="width: 10%;"><input type="checkbox"/> 5th</td> <td style="width: 40%;">Child's Date of Birth ___/___/___</td> </tr> <tr> <td colspan="6">Registration Fee \$50 + Materials Fee \$250 =</td> <td><input type="checkbox"/> Total Fee \$300</td> </tr> </table>	<input type="checkbox"/> K	<input type="checkbox"/> 1st	<input type="checkbox"/> 2nd	<input type="checkbox"/> 3rd	<input type="checkbox"/> 4th	<input type="checkbox"/> 5th	Child's Date of Birth ___/___/___	Registration Fee \$100 + Materials Fee \$300 =						<input type="checkbox"/> Total Fee \$400	<input type="checkbox"/> K	<input type="checkbox"/> 1st	<input type="checkbox"/> 2nd	<input type="checkbox"/> 3rd	<input type="checkbox"/> 4th	<input type="checkbox"/> 5th	Child's Date of Birth ___/___/___	Registration Fee \$50 + Materials Fee \$250 =						<input type="checkbox"/> Total Fee \$300	<input type="checkbox"/> K	<input type="checkbox"/> 1st	<input type="checkbox"/> 2nd	<input type="checkbox"/> 3rd	<input type="checkbox"/> 4th	<input type="checkbox"/> 5th	Child's Date of Birth ___/___/___	Registration Fee \$50 + Materials Fee \$250 =						<input type="checkbox"/> Total Fee \$300
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The parent or guardian agrees that he/she is contracting for the services, which are checked above and will pay the stipulated rate for the annual services even in the event the child is on vacation or absent from school. Payment of registration and material fees will be securing a guaranteed space for his/her child(ren) for the 2018-2019 school year.

The registration and material fees must be prepaid and these fees are **NON-REFUNDABLE**.

****10% Sibling Discount taken on the lesser cost enrollment. If enrolling 3+ Siblings = 10% discount for all siblings enrolled.**

2018-2019 Tuition Plans (Summer Program Not Included)

- OPTION 1 - \$5,150 - Regular Tuition Only** - K-3 Grade 8:45am - 2:45pm / 4th-5th Grade 8:45am - 3:45pm Regular School Day
 - OPTION 2 - \$7,400 - Full Day Ext Care + Regular Tuition** - K-5th Grade - Monday - Friday 7:00 am - 6:00 pm
 - OPTION 3 - \$6,500 - Morning Only Ext Care + Regular Tuition** - K-3 Grade 7:00 am - 2:45 pm / 4th-5th Grade 7:00am - 3:45pm
 - OPTION 4 - \$6,950 - Homework Club (Mon - Thurs) + Regular Tuition** - K-3 Grade 8:45 am - 4:30 pm / 4th-5th Grade 8:45am - 5:30 pm
 - OPTION 5 - \$6,200 - 1 Sibling Bridge** K-3 Grade 8:45 am - 3:45 pm for families w/students that are in both K-3 & 4th & 5th
- Drop in rates are available upon request for emergencies and school breaks*

Parent Contract Agreement

I am hereby registering my child for the 2018-2019 school year. In order to secure a guaranteed enrollment for the 2018-2019 school year I am submitting the \$_____ registration and materials fee with this form. **I understand these fees are non-refundable and tuition is due on the 1st of each month. A \$35 late fee that will be charged on the 6th of each month.**

Please check your option: ___ **OPT 1- \$5,150** ___ **OPT 2- \$7,400** ___ **OPT 3- \$6,500** ___ **OPT 4- \$6,950** ___ **OPT 5- \$6,200**

Full Tuition Paid in Full by 08/01/2018 5% discount **10 month 08/01/18 - 05/01/19** **12 month 06/01/18 - 05/01/19***

*12 month program does not include summer program and cannot be enrolled in both school and summer programs at the same time.

EFT Payment Agreement

- Yes, I plan on using a debit/credit card to make on-line tuition payments during the 2018-2019 school year. I understand there will be a one time Credit Card Transaction fee of \$100 per family for the year.
- No, I will not be using my debit/credit card to make on-line tuition payments during the 2018-2019 school year. If I decide to pay via Debit/Credit at a later date, I agree to pay a 3% Credit Card transaction fee and it will be added to my next months tuition invoice.

Parent or Guardian Signature

Date

All God's Children Christian School 2018-2019 Elementary Enrollment Form

1900 Willow Lake Road
Discovery Bay, CA 94505
Office & Fax (925) 513-8006
Email: agcschool8@gmail.com

Student #1 Information: Date of Birth ____/____/____ Enrolling in K 1st 2nd 3rd 4th 5th

Student: _____ Gender M F
Last First Middle

Student #2 Information: Date of Birth ____/____/____ Enrolling in K 1st 2nd 3rd 4th 5th

Student: _____ Gender M F
Last First Middle

Address: _____
Street City Zip Code

Mother: _____ Cell # _____ Work # _____ Home # _____

Father: _____ Cell # _____ Work # _____ Home # _____

Guardian: _____ Cell # _____ Work # _____ Home # _____

Occupation Mother: _____ Occupation Father: _____

Primary email address for school communication: _____

Secondary email address for school communication: _____

Student lives with Mother Father Both Guardian Married Single Parents Divorced Parents Separated

Ethnicity of Student Asian African American Caucasian Hispanic/Latino Other _____

Student Emergency and Medical Information:

Relative or friend that can be contacted if parent is unavailable _____ Phone # _____

Persons authorized to pick up student from school: (If person is not known to staff they will be asked to show a picture identification)

Name: _____ Relationship _____ Phone # _____

Name: _____ Relationship _____ Phone # _____

Name: _____ Relationship _____ Phone # _____

Student's Physician: _____ Phone # _____

Hospital _____ Group # _____

Student's Dentist: _____ Phone # _____

Hospital _____ Group # _____

Known Food or Drug Allergies: _____

Any other medical conditions we should be aware of: _____



ALL GOD'S CHILDREN CHRISTIAN SCHOOL FAMILY STATEMENT OF FAITH

In an effort for us to better support your family's spiritual needs. We would like to know a little more about your family's spiritual background and how we can better serve you and your family. We are involved with other churches in our community who have outreach programs such as Vacation Bible School & Awana, and we want to communicate with our AGC families of ongoing Christian community youth activities.

All God's Children Christian School (AGC) believes God personally formed each child to His liking with a specific plan in mind. We see a glimpse of God's individual design reflected in the life of each child. As All God's Children Christian School educators, we embrace the uniqueness of each and every child God has placed at our school.

All God's Children Christian School's purpose is to provide a Christian atmosphere that encourages social, emotional, physical, and intellectual growth. We strive for the development of the child as a whole. All children enrolled in All God's Children Christian School have the right to be happy, safe, and treated with respect and compassion.

Mother's Name: _____ Home Church: _____ Denomination: _____

Father's Name: _____ Home Church: _____ Denomination: _____

Student's Name: _____ Age: _____ Baptized? Yes No Do you want information? Yes No

Sibling #1: _____ Age: _____ Baptized? Yes No Do you want information? Yes No

Sibling #2: _____ Age: _____ Baptized? Yes No Do you want information? Yes No

Sibling #3: _____ Age: _____ Baptized? Yes No Do you want information? Yes No

Are you interested in information about Delta Community Presbyterian Church? Yes No

What made you want your student(s) to attend All God's Children Christian School?

Referral My student has friends at AGC I want my Student to have a Bible Based Education

Other: _____

Please write out why you want your student(s) to attend All God's Children Christian School?

