



**L A C O M B E
CHRISTIAN SCHOOL**

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PLAYSCHOOL STUDENT APPLICATION FORM

Our Vision Statement:

*To the glory of God, by His grace, and on the foundation of His Word,
Lacombe Christian School strives to nurture and educate children to be
Spirit-filled disciples of Christ and responsible, discerning citizens in society.*

AIM AND PURPOSE OF LACOMBE CHRISTIAN SCHOOL

1. To have our children taught in a school that acknowledges the rule of God in all areas of life including education and the fields of knowledge.
2. To prepare the student as an image-bearer of God for meaningful participation in society.
3. To make the student see his life-task in the context of the Kingdom of Jesus Christ.
4. To show the student the way to total commitment and surrender to Christ.
5. To guide the student in understanding the radical consequences of such a commitment, affecting all areas and relationships of life.
6. To work (complement/partner) with the home and church in bringing up the children entrusted to us.

ELIGIBILITY

1. Children must reach the age of 4 by December 31st to be eligible to attend LCS Playschool
2. The Lacombe Christian School exists to educate primarily the children of Christian parents.
3. Admission is available to all students of parents who agree with the aim and purpose of the school.
4. No child shall, on the grounds of race, color, gender or national origin be excluded from admission to Lacombe Christian School.
5. The Board may limit enrollment.

ENROLLMENT INFORMATION AND PROCEDURES

1. Complete this **PLAYSCHOOL** application form for child being enrolled.
Submit this to the school office along with:
 - a. Tuition agreement form.
2. **Admissions interviews:**
 - a. Meet with the LCS Principal or Vice-Principal.
 - b. Two members of the School Board will arrange for a home visit.
 - c. Both parents (legal guardians) are expected at each of these interviews.
3. Parents will be informed by phone once their application has been approved by the Board.
4. Families with children entering Playschool are expected to attend a Playschool Orientation Meeting.

PLEASE NOTE: A separate student application form is required for additional children entering Grades K-9.

For Office Use Only: MWB_____ (date) MWP_____ (date) DATE APPLICATION REC'D _____

Lacombe Christian Playschool - Child's Basic Information

Child's LEGAL Name (first, middle, last) _____

Preferred name: _____

Date of Birth: _____ Sex: M _____ F _____

Birth Certificate: Yes / No (If yes, please attach a copy to this form.)

Is English your child's first spoken language at home? Yes / No If no, please specify _____

Address: (include full legal land description **or** street address)

Mailing address:

The student resides with:

___Mother ___Father ___Mother & Father ___ Foster Care Provider ___Other: _____

Parent/Guardian (1) Full Name: _____

Home phone: _____ Cell: _____ Work: _____

Email address: _____

Address if different from the child's above? (include full legal land description **or** street address)

Mailing address:

Name of employer: _____

Address where you can be reached while child is in care:

Parent/Guardian (2) Full Name: _____

Home phone: _____ Cell: _____ Work: _____

Email address: _____

Address if different from the child's above? (include full legal land description **or** street address)

Mailing address:

Name of employer: _____

Address where you can be reached while child is in care:

Initial of parents, stating the information on this page is complete and true.

Child's Personal Health Information

Alberta Health Care Number: _____

Child's Health Care Provider (Doctor): _____

Clinic Phone Number: _____

Clinic Name and Address: _____

Is your child on any ongoing medications? If yes please specify:

Does your child have any special health considerations? If yes, please specify:

Does your child have any allergies, including drug reactions? If yes, please specify:

Immunizations up to date? **Yes** (please attach a copy to this registration package.) **No**

Have you received documentation for your child referring to Occupational Therapy, Speech, Social Work or Mental Health? **Yes** (please attach copies to this registration package.) **No**

Consent to Medical Care and Treatment of minor children.

I/ We _____ give permission for my/our child _____, to be given first aid/ emergency treatment by a child care provider, licensee and / or qualified staff member of Lacombe Christian School.

Parent/ Guardian (1) Signature: _____ Date: _____

Parent/ Guardian (2) Signature: _____ Date: _____

When I cannot be contacted, I authorize and consent to medical, surgical, and hospital care, treatment and procedures to be performed for my child by a licensed Physician, Health Care Provider, Hospital or Ambulance Attendant, when deemed necessary or advisable by the Physician or Ambulance Attendant to safeguard my child`s health. I waive my right of informed consent to such treatment. I also give my permission for my child to be transported by Ambulance or aid car to an emergency centre hospital for treatment.

Parent / Guardian (1) Signature: _____ Date: _____

Parent / Guardian (2) Signature: _____ Date: _____

_____ Initial of parents, stating the information on this page is complete and true.

FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY

Lacombe Christian School plays an important part in the education and socialization of our children. In this process, personal information is often collected and used for authorized programs and activities that are a normal part of school life. Further information regarding the collection and use of personal information not specifically itemized under the School Act is available at your school's main office.

It is important to understand that school events which are open to the public are not subject to the conditions of the PIPA Act. These events may include general assemblies, concerts, school plays, special activities, academic focused activities and athletics. The general public, parents and media may be in attendance and are allowed to take photographs, videos and conduct interviews, without first obtaining consent. (It is not expected that the general public or parents will conduct interviews) the media are expected to work cooperatively with schools within the realm of mutually agreed upon guidelines and protocol.

Throughout the school year, there will be opportunities for television, radio, newspaper, community organizations, and the school division to be invited into the school to provide outside coverage of events and programs not included in the general public category described above. Also, throughout the year, there may be opportunities to display your son or daughter's work or other forms of school work at locations outside the school. Your signature (Parent guardian) will indicate approval for your son or daughter named on this form to be involved with any of the following activities on the occasion when the associated event or situation to be covered is not included in the public domain category described in bold print above.

1. Interviewed by the media, approved community organizations, School
2. Photographed by the media, approved community organization, School
3. Videotaped by media, approved community organizations, School
4. Student work, accomplishments to be displayed, recognized or reproduced outside of the school (i.e. Signed artwork, creative writing, student of the day or academic presentations such as science fair)
5. Publication of your son or daughter's name, photographs and or school work on Lacombe Christian School website.

Note: Information relating to these student work recognition activities noted in points 4 and 5 will be communication home in advance.

Please select either option:

Option 1: Permission granted

I have read the information above and understand and accept that there are a variety of uses that may be made of personal information in the context of a school setting, including the items listed under points 1 through 5 above.

Option 2: Permission not granted

I have read the information above and understand and accept that there are a variety of uses that may be made of personal information in the context of a school setting, However **I WILL NOT** provide approval for a general consent allowing my son or daughter to participate in the activities described in points 1 through 5 above. Concerns relating to children's exposure to the media. *(Please make these personally known to the principal of Lacombe Christian School)*

Unless the school is notified of a change, the signed document will be in effect for the entire time your son or daughter is registered within the Lacombe Christian Playschool Program.

Parent/Guardian (1)Signature: _____ **Date:** _____

Parent/Guardian (2) Signature: _____ **Date:** _____

_____ Initial of parents, stating the information on this page is complete and true.



2021-2022 TUITION AGREEMENT FORM

2021-2022 FEE SCHEDULE:

Criteria:	AMOUNT	YOUR SELECTION:
Playschool Student ONLY. (No other children @ LCS)	Tue/Th: \$1,200 Fri only: \$840	
Playschool Student with other children in LCS K-9.	Tue/Th: \$750 Fri only: \$525	
Kindergarten Student ONLY. (No other children @ LCS) Suggested donation.	\$ 1,200	
Tuition Fee for families with children in LCS Grades K-9.	\$ 6,000	
Tuition Fee for families with children in LCS Grades K-9, AND children attending CACHS.	\$ 4,500	
	TOTAL FEES:	

1. All fees include the \$100 LCS Membership Fee.
2. **WAYS TO PAY:**
 - 2.1 We encourage you to use the EFT Form (on reverse side) for automatic transfers. (If you already have EFT set up with us, please indicate this is a renewal with the amended amount to be debited.)
 - 2.2 E-Transfers are also accepted. Email business@lacs.ca
 - 2.3 DEBIT & CREDIT CARD payments are accepted in person at the office. Please note: for tuition payments on credit cards, there will be a 3% fee added at the point of sale.
3. Government funding for independent schools in Alberta covers only a part of the school's operating costs, therefore the need for charging tuition.
4. Please find a copy of the current tuition policy attached to this package.
5. If applicable, please complete the Tuition Relief form attached to this package.

If you have any questions, please email Jack Oudman at business@lacs.ca

Payment Schedule:

Monthly (12 months): _____
 Monthly (10 months): _____
 Quarterly: _____
 Semi-Annually: _____
 Annually: _____
 Other: _____

Payment Method:

EFT: _____
 E-transfer: _____
 Debit/Credit Card: _____
 Other: _____

Tuition Relief Request: Please complete the attached application form, if applicable

Signature

Date

Tuition Assistance

Purpose

The purpose of the Tuition Assistance Program is to provide **temporary** financial assistance towards payment of LCS tuition fees, for families who are unable to meet the full cost of Christian Education.

As Christians, we recognize that all we have comes from God, and that we are simply stewards of God's possessions. We are, therefore, thankful and grateful for what God has provided. And so, it is our joy to be able to share with those in need as we seek to extend God's kingdom together.

"Carry each other's burdens, and in this way you will fulfill the law of Christ." Galatians 6:2

"And do not forget to do good and to share with others, for with such sacrifices, God is pleased." Hebrews 13:16

As a board, we are called to be good stewards and we are accountable to God who has entrusted us with the financial matters relating to LCS. We are also accountable to our membership as we deal with our financial commitments to our staff and our school's expenses, including services of debt and providing for physical property.

"So if you have not been trustworthy in handling worldly wealth, who will trust you with riches?" Luke 16:11

Process

For those who require tuition assistance for the 2018-2019 year, please complete **in full** the following pages with the required information. The completed package should be put in a sealed envelope and marked: "Private and Confidential" to the Business Administrator of LCS. Personal financial details will be disclosed to the Business Administrator, Board Treasurer, and one other Board Member. A Board member will be in contact with you promptly regarding this application.

Please return the required form by June 5, 2020.

In the rare circumstances where tuition assistance is required for the subsequent school year, a new application form must be completed.

Guidelines

Tuition assistance is a temporary solution. At times there are many applicants and limited resources, such that only the neediest applicants can be accepted. Every effort should be made to seek help from the church community, relatives, or friends. Also, every effort should be made to determine whether personal assets can be accessed.

Circumstances where an application is likely to be accepted:

Sudden loss of employment without the ability to replace income.

Terminal or significant health issues.

Marital breakdown without the ability to replace income.

An attempt to at least pay a portion of the tuition.

Circumstances where an application is likely to be rejected:

The ability to borrow funds.

Where assistance from the church community, friends, or relatives is available.

The ability to sell certain non-essential assets or investments.

Chronic requests for tuition application where lifestyle suggests spending is not well controlled.

Lack of effort in ensuring financial stewardship.

Tuition assistance extending longer than one year.

Generally, tuition covers 25% of the overall operational costs (ie: salaries, utilities, transportation, etc) of education and none of the capital costs (ie mortgage) of the school facilities. Therefore, tuition fees are only the minimum contribution required by parents or guardians. Parents and guardians are also expected to contribute for capital costs/drives/fundraisers, etc on an ongoing basis.

Tuition Assistance Application 2021-2022

Parent/Guardian names:	Address (& years there):
Phone:	Cell phones:

List all the students in your household:			
Name	Age	School / College attending	Parental Contribution

Church Affiliation:	Pastor:
What does Christian Education mean to you?	What personal financial distress is your family experiencing?
Explain how you have made use of other financial resources:	Church:
Selling of non-essential assets/investments:	Friends and Relatives:
What is your plan to cover tuition costs next year, bearing in mind that tuition relief is reviewed annually, and is viewed as temporary assistance?	

Personal Net Worth Statement:

ASSETS	Approx. Value	LIABILITIES (DEBTS)	Approx. balance
Property:		Mortgage (principal remaining):	
Cash on hand (bank accounts):		Credit Cards:	
Investments-GIC, stocks, mutual funds:		Vehicle Loans/Lease:	
Automobiles:		Lines of Credit:	
RV, quad, boat, motorcycle:		Bank Loans:	
Other real properties:		Loans against assets:	
Livestock:		Unpaid bills:	
Other: (please specify):		Other: (please specify):	
TOTAL ASSETS:		TOTAL LIABILITIES:	