

Christian Heritage School

P. O. Box 1780 • Corona, CA 92878-1780 • 951.736.3033

Registration Application for Associate Members ONLY

Date _____

One application per family - please print in dark ink.

Referred to school by _____

| | | | |
|--|----------------------------------|-------------------------------|-------------------------|
| FAMILY INFORMATION - for parents <u>living with</u> the children being taught at home | | | |
| Family Name _____ | | | |
| _____ Last | _____ Husband's Legal First Name | _____ Wife's Legal First Name | |
| Name you prefer to be called _____ | | | |
| _____ Husband's First Name | | _____ Wife's First Name | |
| Home Address _____ | | | |
| _____ Street | _____ City | _____ State | _____ Zip |
| Mailing Address (if different) _____ | | | |
| Home Telephone (_____) _____ | | Cell Phone (_____) _____ | |
| FAX (_____) _____ | | E-Mail address _____ | |
| Name of Church _____ | | | Attend regularly? _____ |

| CHILDREN INFORMATION - Please list ALL children living in home | | | | | *show grade level in Sept. of school year of application |
|---|--|-----------|----------------------|----------------|--|
| Legal First & Last Names | Name child to be called (if different) | Sex (M/F) | Birthdate (MM/DD/YY) | Grade (see* ↗) | School Where Enrolled |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |

| |
|--|
| OFFICE USE ONLY |
| Date App Rec'd _____ |
| Pymt Rec'd: Ch # _____ Amt _____ |
| New _____ Returning _____ |
| Known to staff _____ Sponsored by _____ |
| Appr _____ Ent: Comp _____ Chron _____ Acctg _____ |
| CCs: Adm EC Reg SGL _____ |
| Map Code _____ |

- ▶ **COMPLETE ALL REMAINING PAGES OF THIS APPLICATION.**
- ▶ **ENCLOSE \$20 NON-REFUNDABLE APPLICATION FEE.**
 - ▶ Do not include any other registration or tuition payment until application has been approved.
 - ▶ Remaining fees will be billed and must be paid before registration is considered complete.
- ▶ **MAIL TO ADDRESS AT TOP.**

Incomplete applications will be returned.

PARENT INFORMATION - Give information and checkmark which parent it is for.

Place of Employment: (Mom Dad) _____

Address _____

Telephone _____ # Hours/wk. _____ Days/Times _____

Place of Employment: (Mom Dad) _____

Address _____

Telephone _____ # Hours/wk. _____ Days/Times _____

Marital Status:(Check all that apply) Married Single Widowed Divorced

If biological parents do not live at the same address, please list information of parent not living with child:

Name _____ Telephone _____

Address _____

MEDICAL/EMERGENCY INFORMATION - In the rare instance of a medical emergency at a school-sponsored activity in which the parents cannot be reached, we will need the following information including the signed release below, which covers all children participating at Christian Heritage School.

First Aid:

May we administer regular first aid including ambulance if deemed appropriate? Yes _____ No _____

Do you authorize hospital or doctor to administer necessary medical treatment? Yes _____ No _____

Does any child have a serious health problem? Yes _____ No _____ If yes, identify:

Child's name _____ Problem _____

Child's name _____ Problem _____

Emergency Contacts (at least two other than mom/dad):

Name _____ Telephone (____) _____

Name _____ Telephone (____) _____

The school does not pay physician fees or medical expenses of students who are injured at school or school-sponsored activities.

Authorized Signature _____

(Parent or Legal Guardian)

SPONSORSHIP INFORMATION - For Activities Associates only: Check appropriate box and complete.

Our family is known by CHS staff member(s): _____

Our family is know by the following CHS member family who has offered to sponsor us: _____

**CHRISTIAN HERITAGE SCHOOL
ASSOCIATE MEMBERSHIP POLICIES**

Please read the following statements. If you are in agreement with and will abide by these policies, initial on the line after each item, sign at the bottom and return with your non-refundable application fee.

1. We have read the school's Statement of Faith below, and we are in agreement with it. We understand that the Christian faith is the basis of this organization. _____

2. We as parents have read and signed the school's Code of Conduct to indicate agreement with its content; also all students fourth grade or above and younger students who are old enough to understand have signed the Code of Conduct as well. _____

3. We understand that:
 - a. Failure to pay tuition in a timely manner without notifying school of extenuating circumstances will be cause for dismissal. _____
 - b. When our children attend school-sponsored activities, unless otherwise announced, we (the parents) are required to attend with our children and are responsible for their safety and supervision. _____
 - c. Christian Heritage School is in no way responsible for actual education of the students. _____

4. We affirm that:
 - a. The student(s) under consideration are homeschooling independently or through another private homeschool group. _____
 - b. The student(s) under consideration are not enrolled in a public school or public charter. _____

5. We understand that the school cannot offer legal immunity and is only providing school auxiliary services to assist parents. _____

STATEMENT OF FAITH

We believe in the Scriptures as the final and supreme authority in faith and life. We believe in the one God, eternally existing in three persons: Father, Son and Holy Spirit. We believe that Jesus Christ, by offering Himself on the cross, paid the penalty for man's sin, and that we now may enter into the family of God on the basis of His shed blood. We believe in the bodily resurrection and imminent return of our Lord and Savior Jesus Christ. We believe that all who by faith receive the Lord Jesus Christ are born of the Holy Spirit and thereby become children of God.

CONSENT TO POLICY

We have read the above policies and agreed to abide by them. It is understood that the services of the school are engaged by mutual consent and that either we or the school reserve the right to terminate any or all services at any time by written notification.

Father's Signature _____ Date _____

Mother's Signature _____ Date _____

All applications are subject to school board approval.