

Name

Name

GRAYSON CHRISTIAN SCHOOL



Age

Age

Home of the Falcons

4400 US Hwy 82 East - Sherman, TX 75090 - PH: 903-892-3304 Fax: 903-868-2546

APPLICATION FOR RE-ENROLLMENT FOR 2020-2021 SCHOOL YEAR

This application is for students presently enrolled who desire to return for the 2020-2021 academic year. The re-enrollment fee of \$75.00/per student must accompany this application and is not refundable. Re-enrollment must be turned in by **June 17, 2020**, if application is returned by May 8th and will increase to the regular enrollment fee of \$150.00/per student if not received by **May 8th**.

Grade Next Yr.

Grade Next Yr.

Name			Grade Nex	t Yr. Age	
<u>Name</u>			Grade Nex	t Yr. Age	!
*Will your student (s) be attending the	Extended School	Day Program during t	he 2020-2021 school y	ear? Yes	No
*Re-enrollment Fee will be paid by	this method:	FACTS account	Check	Cash	l
	-				
F	AMILY	INFORM	MATION		
Лr			<u> </u>		
Last	First	Middle Initi	al	Relationship to Studer	nt
Ars	First	Middle Initi	 al	Relationship to Studer	nt
tudent's Address					
Street		-	City	State	Zip Code
udent's Home Phone ()		Student's Co	ell Phone ()		
ather's Cell Phone ()		Mother's Co	ell Phone ()		
arent's Email:		/			
	Father's Email		Mo	ther's Email	
ather's Place of Employment			Work Phone ()		Ext
lother's Place of Employment			Work Phone ()		Ext
larital Status: [] Married [] Divorced	[] Widowed	[] Separated	[] Sing	le
divorced or separated please provid	e the address o	of the non-custodial r	narent:		
arvorced or separated please provid	c the address c	in the non eastocial p	arciic.		
Name	Street		City	State	Zip Code
rst Emergency Contact: (Check One)	ather	Mother			
mergency Contacts (To be notified in	case of an eme	ergency, <u>if parents ar</u>	<u>e unavailable</u>):		
ame	Relati	onship to Student		Phone ()	

*Please read, sign and date the back of this page...

**Please read the below statements and then sign in acknowledgment:

- I understand that my child is expected to take part in educational activities, including sports and sponsored trips away from the facility, and I absolve the school from liability to me or my child because of any injury to my child at supervised school activities.
- I agree to uphold and support the high academic standard of the educational ministry by providing a
 place at home for my child to study and by encouraging my child in the completion of any homework
 or assignments.
- I hereby grant all rights to GCS regarding the use of my student's picture/video images in the school's web-site and/or other publicity materials.
- I appreciate the standards of the educational ministry and do not tolerate profanity, obscenity in word or action, dishonor to the Godhead or the Word of God or disrespect to the staff of the school.
- I hereby agree to support the regulations published in the school educational handbook in the applicants behalf and authorize the school to employ discipline, as it deems wise and expedient for the training of my child.
- I understand that the school reserves the right, after parental conference, to dismiss any child who fails to comply with the established regulations.
- I have read the school educational handbook, signed a Corporal Correction Release and understand and agree to the terms stated on this application.
- I have read the school handbook, and agree with the schools statements of faith, and mission.

Father's Sign	ature	Date	
Mother's Sigr	nature	Date	
K3—2nd Gro	ade Curriculum Fee: one		
	Curriculum \$400 to be billed over 10 months. Use Early Discount and Pay \$300 by July 6th.		
	Say Office Use Only		

Date

Receipt #____

Amount Paid _____