



*Thank you for your interest in Lakeview Christian School! Lakeview endeavors to touch the hearts of students, challenging them to honor God with their lives. Our school uses the ABeka and Bob Jones curriculums. We offer a ½ day program for our K-3 and K-4 and all day for our K-5-12<sup>th</sup> grade classes.*

*Our curriculum offers a lively academic program and gives them a desire to learn more. In our K-3 program, they are introduced to counting numbers with Button Bear, Language development skills, letters and sounds, and arts and crafts. Our K-4, K-5, 1<sup>st</sup>, and 2<sup>nd</sup> grade programs will be introduced to Reading, Phonics, Math, Writing, Art, Bible, and Music. Our K-5-5<sup>th</sup> grade programs will also include Science and History! Our 5<sup>th</sup> grade and up classes will be using the Bob Jones curriculum and will include Science, English, History, Math, Bible, and more.*

*In keeping with our plans, we have added our final traditional classroom this year. The 6<sup>th</sup> through 8<sup>th</sup> grades will make up our middle school and the 9<sup>th</sup> through 12<sup>th</sup> grades will make up our high school. Students in these grades will move between these teachers who will split teaching responsibilities.*

*Our High School program adheres to the South Carolina requirements for graduation. We have had Lakeview graduates move on and further their education at Tri-County Tech, Greenville Tech, Southern Wesleyan, Bob Jones University, and Clemson University.*

*Enclosed you will find an application for enrollment, tuition and fee information, and a financial agreement. To register your child, simply return the completed registration forms along with the non-refundable registration fee and book fees and all other applicable fees to the office.*

*We also must have a copy of your child's immunization records, birth certificate, and social security card for our records. These must accompany all registration papers in order to complete your registration for the 2016-2017 school year.*

*For parents registering a child for K-3, please remember that they must be completely potty trained to attend the K-3 program.*

*If you have any additional questions, please call the school office at 878-6959 between the hours of 8:15-3:00.*

*Thank you,*

*Lakeview Christian School*

PLEASE FILL IN ALL BLANKS AND PRINT CLEARLY

Date of Application: \_\_\_\_\_ School Year: 2016-2017

Grade Entering: K-3 K-4 K-5 1<sup>st</sup> 2<sup>nd</sup> 3<sup>rd</sup> 4<sup>th</sup> 5<sup>th</sup> 6<sup>th</sup> 7<sup>th</sup> 8<sup>th</sup> 9<sup>th</sup> 10<sup>th</sup> 11<sup>th</sup> 12<sup>th</sup>

**Student Information**

Male  Female SS Number: \_\_\_\_\_ Date of Birth \_\_\_/\_\_\_/\_\_\_

Name: \_\_\_\_\_  
Last First Middle Goes By

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Last School or Daycare Attended \_\_\_\_\_ Church Attending \_\_\_\_\_

Child's Physician \_\_\_\_\_ Child lives with \_\_\_\_\_

**Parent 1**

Name \_\_\_\_\_  Married  Separated  Divorced

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell #: \_\_\_\_\_ Carrier \_\_\_\_\_ Work# \_\_\_\_\_

Email Address: \_\_\_\_\_ Employer \_\_\_\_\_

**Parent 2**

Name \_\_\_\_\_  Married  Separated  Divorced

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell #: \_\_\_\_\_ Carrier \_\_\_\_\_ Work# \_\_\_\_\_

Email Address: \_\_\_\_\_ Employer \_\_\_\_\_

In case of emergency, if parents cannot be reached, please notify the following:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell \_\_\_\_\_

Any physical difficulties? Heart, hearing, speech impediment, nervous condition, learning disability, mental or emotional, ect.

Allergies or special medications:

\_\_\_\_\_

**Statement of Cooperation continued (Please check each box)**

If emergency treatment is required and I cannot be reached immediately, I grant the school permission to exercise their own judgment in calling a physician or transporting my child to the hospital emergency room.

I agree to abide by all rules of Lakeview Christian School.

I agree if my child is misbehaving or continually disturbing the class to either pick up my child for the rest of the day or I the parent, agree to come and give my child a spanking at school.

Should my child not adjust to the classroom and/or teacher, I agree to quietly withdraw my child from school.

I have read and understand the Statement of Cooperation above and agree by the policies of Lakeview Christian School.

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Father's signature and date

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Mother's signature and date

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Father's name printed

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Mother's name printed

**Family Information**

Paternal Grandparents	Address	City	State	Zip	Phone #
Maternal Grandparents	Address	City	State	Zip	Phone #

**Pick Up Information**

The following individuals have my permission to pick up my child:

Name	Relationship	Phone
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Statement of Cooperation (Please check each box)**

- I give school administration full responsibility for placing my child in the proper grade.
- I will abide by the conditions of the payment plan for tuition and fees. Separate financial agreement to be signed.
- I agree to pick up my child if he/she is sick.
- LCS has permission to give my child an appropriate dose of pain reliever (i.e. Tylenol, Ibuprofen, Pepto).
- I give my child permission to take part in school activities and will not hold the school liable for injury to the child or damage to child's property.
- I agree to be loyal to the aims and ideals of the school and will bring all questions and criticisms directly to the school administration so they may be properly considered by those in authority, and I will not be publicly critical of any school policy.

ASSUMPTION OF RISK, RELEASE AND IDEMNITY

Travel to and from and the use of facilities at Lakeview Baptist Church and Lakeview Christian School naturally involves the risk of injury, whether the undersigned or someone else causes it. As such, the undersigned agrees that he or she understands and voluntarily accepts this risk and agrees that Lakeview Baptist Church, Inc., Lakeview Baptist Church, and any of their affiliated entities or any officer, director, member, agent, servant or employee (hereinafter collectively "LBC") will not be liable for any injury, including and without limitation, personal, bodily or mental injury, death, economic loss or any damage to the undersigned, the undersigned's spouse, the undersigned children, guest or relative (hereinafter collectively "GUEST") resulting from the negligence of LBC or anyone else using equipment or facilities. If there is any claim by anyone based on any injury, loss, or damage described herein, which involves the GUEST, the undersigned agrees to (a) defend LBC against such claims and pay LBC for all expenses relating to the claim including, but not limited to, any and all attorney's fees, and (b) indemnify LBC for all obligations resulting from such claims. This document shall be construed and enforced in accordance with the laws of the State of South Carolina. Any action at law, suit in equity, or other jurisdictional proceeding arising in connection with this document shall be instituted only in the courts of Pickens County, South Carolina.

WAIVER OF LIABILITY

The GUEST agrees to release from all liability, discharge and promise not to take legal action against (i)LBC; (ii) any other guest, visitor or person present or using the facilities or equipment of LBC; (iii) any designers, manufacturers, or installers of the facilities or equipment of LBC. This agreement releases LBC from any liability to GUEST, their heirs, next of kin, assigns or personal representatives for any loss or damages or claims or demand arising out of GUEST's personal injuries, damage to property or GUEST's death, even if LBC's individual or collective negligence contributes to such personal injury, damage or death. The undersigned hereby waives any and all claims or actions that may arise against LBC, its directors, employees, or volunteers as a result of any such injury to any such person. Such risks include, but are not limited to:

- 1. Injuries resulting from the negligence of operators, employees, or volunteers of LBC; or the negligence of guests, visitors, or persons who may be present at LBC; or the negligence of any designers, manufacturers or installers of the facilities or equipment of LBC.
2. Injuries or death resulting from the failure or negligent misuse, by me or by others, of the facilities or equipment of LBC.
3. Injuries resulting from slips, trips, falls, or other such accidents that occur while using the facilities or equipment of LBC, or which may be caused by other persons' use of the facilities or equipment of LBC.
4. Injuries resulting from participating in and / or using equipment in connection with activities sponsored by LBC which may take place outside of any premises owned or operated by LBC; and
5. Injuries that occur from the negligence or lack of adequate training of those volunteers, agents or employees of LBC who seek to assist with medical or other help either before or after injuries have occurred; and
6. Injuries and or death that may occur on buses transporting GUESTS to and from the facilities of LBC or facilities that LBC may have rented.

The GUEST freely and voluntarily assumes complete personal responsibility for these risks and for the injuries that may occur as a result of these risks, even if such injuries occur in a manner that is not foreseeable at the time this Agreement is signed.

BY SIGNING BELOW, THE GUEST ACKNOWLEDGES THAT IT HAS READ THIS AGREEMENT THOROUGHLY AND UNDERSTANDS AND ACCEPTS THE TERMS CONTAINED HEREIN AND THAT NO ORAL REPRESENTATIONS OR STATEMENT OR INDUCEMENTS HAVE BEEN MADE TO GUEST THAT CHANGE, ALTER, OR MODIFY ANYTHING WITHIN THE WRITTEN AGREEMENT. BY SIGNING BELOW THE UNDERSIGNED REPRESENTS AND WARRENTS THAT THEY HAVE THE AUTHORITY TO SIGN THIS WRITTEN AGREEMENT ON BEHALF OF ALL INDIVIDUALS WHOSE LEGAL RIGHTS THIS AGREEMENT CONTEMPLATES TO WAIVE. IN THE EVENT ANY PORTION HEREOF IS HELD INVALID, IT IS AGREED THAT THE BALANCE SHALL, NOTWITHSTANDING, CONTINUE IN FULL LEGAL FORCE AND EFFECT.

Signature of Adult (If participant under 18, Parent/Legal Guardians Signature) Date

Print Name

If under 18, please print all names:

Two horizontal lines for printing names.



# Lakeview Christian School

107 Mauldin Lake Road-Pickens, SC 864-878-6959

## Financial Agreement 2016-2017

I understand payments are due on the first day of each month. If not paid by the 10<sup>th</sup> of each month, I will pay a \$25.00 late fee.

I understand that there will be a \$25.00 charge for any check or bank draft returned for insufficient funds. On the second offense, there will be a \$35.00 charge, and the check must be redeemed from the bookkeeper, by cash, within five (5) days. Also after the second offense, all future payments must be made by cashier's check or cash, personally to the bookkeeper.

I understand there is a \$125.00 registration fee for new students and \$75.00 registration fee for returning students. I further understand there is no refund on registration fees. I also understand that there is no refund on book fees after the book order has been placed.

**I understand that I am responsible for the Entire Tuition whether my child finishes the year or not. The monthly payments are for your convenience only.**

Name of Children	Grade
_____	_____
_____	_____

Parents: \_\_\_\_\_

Father's Name Printed

\_\_\_\_\_

Father's Name Signed & Date

\_\_\_\_\_

Mother's Name Printed

\_\_\_\_\_

Mother's Name Signed & Date



# Lakeview Christian School

107 Mauldin Lake Road - Pickens, SC 864-878-6959

## Registration Information for 2016-2017 School Year

Grade	Registration Fee Non-Refundable (One fee per family)	Book Fee (6 <sup>th</sup> -11 <sup>th</sup> choose textbooks or ebooks)	Insurance	Testing Fees	Classroom Supplies/Parent Connection (required for K5-12)	*Yearbook (Optional)	10-Month Payment Plan	Annual Tuition	Total Due at Registration New Student	Total Due at Registration Returning Student
K-3 Half Day	\$125.00 for new students	\$75.00	\$10.00	\$0	\$20	\$25	\$130.00	\$1300.00	\$385.00	-----
K-4 Half Day	\$75.00 for returning students \$125.00 for new students	\$100.00	\$10.00	\$0	\$20	\$25	\$130.00	\$1300.00	\$410.00	\$230.00
K-5 - 5th Full Day	\$75.00 for returning students \$125.00 for new students	K-5 \$140.00 1 <sup>st</sup> -4 <sup>th</sup> \$250.00 5 <sup>th</sup> \$350.00	\$10.00	\$25	\$20/\$20	\$25	\$180.00/1 <sup>st</sup> child \$170.00/2 <sup>nd</sup> child	\$1800.00/1 <sup>st</sup> child \$1700.00/2 <sup>nd</sup> child	K-5 \$545.00 1 <sup>st</sup> -4 <sup>th</sup> \$655.00 5 <sup>th</sup> \$755.00	K5 \$315.00 1 <sup>st</sup> -4 <sup>th</sup> \$425.00 5 <sup>th</sup> \$525.00
6 <sup>th</sup> -11 <sup>th</sup> Full Day	\$75.00 for returning students \$125.00 for new students	Textbooks/Ebooks 6 <sup>th</sup> -9 <sup>th</sup> \$400.00/\$275.00 10 <sup>th</sup> -11 <sup>th</sup> \$450.00/\$350.00	6 <sup>th</sup> \$10.00 7 <sup>th</sup> -11 <sup>th</sup> \$15.00	\$25	\$20/\$20	\$25	\$180.00/1 <sup>st</sup> child \$170.00/2 <sup>nd</sup> child	\$1800.00/1 <sup>st</sup> child \$1700.00/2 <sup>nd</sup> child	6 <sup>th</sup> Text \$805.00 6 <sup>th</sup> Ebk \$680.00 7 <sup>th</sup> -9 <sup>th</sup> Text \$810.00 7 <sup>th</sup> -9 <sup>th</sup> Ebk \$685.00 10 <sup>th</sup> -11 <sup>th</sup> Text \$860.00 10 <sup>th</sup> -11 <sup>th</sup> Ebk \$760.00	6 <sup>th</sup> Text \$575.00 6 <sup>th</sup> Ebk \$450.00 7 <sup>th</sup> -9 <sup>th</sup> Text \$580.00 7 <sup>th</sup> -9 <sup>th</sup> Ebk \$455.00 10 <sup>th</sup> -11 <sup>th</sup> Text \$630.00 10 <sup>th</sup> -11 <sup>th</sup> Ebk \$530.00
12 <sup>th</sup> Full Day	\$75.00 for returning students \$125.00 for new students	\$450.00	\$15.00	\$25	\$20/\$20	\$25	\$180.00/1 <sup>st</sup> child \$170.00/2 <sup>nd</sup> child	\$1800.00/1 <sup>st</sup> child \$1700.00/2 <sup>nd</sup> child	\$860.00	\$630.00

**Fee Dates and Policies:** All registration fees are due before the student will be accepted. Tuition is calculated on an annual basis; the 10-month payment plan has been set up for your convenience. All payments are considered late if received after 3:00 p.m. on the 10th of the month and a \$25.00 late fee will be charged.

ALL students (returning and new) must complete registration forms for each new school year. The necessary forms are available at the school office. Please remember **all forms and fees** must be submitted **together** to the school office in order to complete the registration process and to reserve a place for your child in a class.

\*Yearbooks are optional. Only the number of yearbooks that have been prepaid will be ordered. Please be aware that if a yearbook has not been pre-purchased, your child may not have opportunity to purchase one later.

**Any registration forms turned in after May 20, 2016 will include an additional \$100.00 fee to cover additional charges incurred by the school.**

Insurance is a one million dollar policy covering the child in the event of accidents while they are at school. It is mandatory that each child purchase this insurance through the school. **All fees are subject to change.**