



**WICHITA CHRISTIAN SCHOOL
RE-ENROLLMENT INTENT 2019-2020**

(This form is only needed from currently enrolled students.)

STUDENT NAME: _____ **GRADE ENTERING:** _____

_____ **Yes, my student will return to Wichita Christian School for the 2019-2020 school year.**

- Registration form completed and attached.
- Mandatory signature forms are completed and attached.

_____ **No, my student will not be returning for the 2019-2020 school year because:** _____

_____ **Our plans for the 2019-2020 school are uncertain at this time. If I have not notified the school of my student's intent by March 31st, 2019, please call.**

Parent Signature: _____ **Date:** _____

At Wichita Christian School, we appreciate the opportunity to assist parents in fulfilling their God-given responsibility to teach their children and to provide our students with an excellent spiritual and academic education with which to serve God. We thank you for choosing Wichita Christian School for your child's education.

Sincerely,
Karla Wallace
Superintendent for Wichita Christian School

PRESCHOOL TUITION RATES 2019-2020	
Three Day (M/W/F) 18 mos. – 2 Year Old	\$5,530
Three Day (M/W/F) 3 – 4 Year Old	\$4,870
Five Day 18 mos. – 2 Year Old	\$6,500
Five Day 3 – 4 Year Old	\$5,750
Transitional Kindergarten	\$5,750

K-12th GRADE TUITION RATES 2019-2020	
WCS Preschool Entering Kindergarten	\$6,650
Kindergarten – 6 th Grade	\$6,950
7 th – 12 th Grade	\$8,290
NEW Foreign Exchange Student	\$9,100



**WICHITA CHRISTIAN SCHOOL
2019-2020 REGISTRATION FORM**

STUDENT INFORMATION:

STUDENT'S NAME: _____

Address: _____ (last) _____ (first) _____ (middle) _____
City: _____ State: _____ Zip: _____

Phone Number: _____ E-mail Address: _____

Birthdate: _____ **Grade entering:** _____ OR **Preschool:** 5 days/week 3 days/week (M/W/F only)

- 18 mos. Old
- 2 Year Old
- 3 Year Old
- 4 Year Old
- Transitional Kindergarten

FAMILY INFORMATION: **No change in contact information.**

FATHER OR LEGAL GUARDIAN: _____

Address (if different than student's): _____ (last) _____ (first)

City: _____ State: _____ Zip: _____

Home phone: _____ - _____ - _____ Work phone: _____ - _____ - _____ Cell phone: _____ - _____ - _____

E-mail address to which we can send school communication: _____

Employer's name: _____ Occupation: _____

MOTHER OR LEGAL GUARDIAN: _____

Address (if different than father's or student's): _____ (last) _____ (first)

City: _____ State: _____ Zip: _____

Home phone: _____ - _____ - _____ Work phone: _____ - _____ - _____ Cell phone: _____ - _____ - _____

E-mail address to which we can send school communication: _____

Employer's name: _____ Occupation: _____

OFFICIAL RELEASE INFORMATION:

I authorize my child to be released to: _____

FIELD TRIP AUTHORIZATION:

I give permission for my child to go on school-sponsored field trips during the 2019-2020 school year. I understand that my child may travel in a private vehicle driven by a parent or teacher. If I do not want my child to participate in the trip, I will notify the teacher the day before the trip.

Parent Signature: _____ Date: _____

EMERGENCY MEDICAL PERMISSION:

I give permission for my child to receive emergency medical treatment if necessary from a WCS staff, faculty or administrator. This treatment will be administered only in the events that I cannot be located within a reasonable amount of time following an accident that demands treatment.

Parent Signature: _____ Date: _____

STATEMENT OF HEALTH: *(Immunization record and birth certificate must be on file before your child's first day of school.)*

My child is physically and mentally able to participate in group activities. My child is participating in an on-going health supervision program with annual evaluations and scheduled immunizations.

Please list any physical problems – i.e., allergies, asthma, ADD, ADHS, autism, hearing, etc. that your child experiences:

Parent Signature: _____ Date: _____

Physician's Name: _____ Phone Number: _____

TUITION AND FEE CHARGES: *The Parent/Guardian agrees to pay Wichita Christian School fully and in a timely manner, in accordance with the payment plan elected, all tuition, charges, fees associated with the student's enrollment and program participation at Wichita Christian School. Access to report cards, transcripts, and other student records will be withheld should the account become delinquent. Students with accounts more than 30 days past due will not be allowed to participate in extracurricular activities, events or sponsored trips. Students with accounts that are 60 days past due will be unenrolled and will not receive student records until all past due accounts are paid in full.*

My student's tuition will be paid in full on or before the first day of the 2019-2020 school year. A 5% discount will be applied if the Parent(s)/Guardian(s) are not eligible for any other discount.

My student's tuition will be paid in 2 installments: one installment on or before the first day of the 2019-2020 school year and one installment on or before the first day of the second semester of the 2019-2020 school year. A 2% discount will be applied if the Parent(s)/Guardian(s) are not eligible for any other discount.

My student's tuition will be paid in 10 monthly installments through the FACTS Tuition Management System with the first installment being paid on or before the student's first day of school and continuing monthly until the tuition is paid in full.

AFTER SCHOOL CARE PROGRAM: *(Available at both campuses from 3-5:30 p.m., to be billed monthly)*

My student will attend the After School Care Program: 5 days per week (\$230 per month)

3 days per week (\$195 per month)

Drop In (\$25 per day)

FINANCIAL ASSISTANCE*: *To qualify for tuition assistance, Parents/Guardians must complete the Financial Assistance application on the ISM FAST website by June 1, 2019. Assistance is awarded on an annual basis. The Parent/Guardian understands that if the student qualifies and is awarded any form of tuition assistance, there may be additional requirements that must be accepted and fulfilled before or after the award is applied to the student's tuition – i.e., tax documents, etc. *Financial Assistance is only available for students entering Kindergarten through 12th Grade.*

Do you plan on applying for Financial Assistance for the coming school year? Yes No

Comments: _____

GRANDPARENT INFORMATION:

Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Name: _____

Address: _____ City: _____ State: _____ Zip: _____

We welcome and appreciate your feedback regarding you and your student's experience at Wichita Christian School!
Please use the space below to let us know what we could do to improve: _____
