



Leesburg Christian School

A ministry of Believers Baptist Church

"The Christian School with a Heart for the Home School-Minded Parent"

ANNUAL RE-ENROLLMENT FORM 2010-2011

(\$125 fee applicable only until March 1)

(Note that registration will open to outside enrollees on March 1. Only those who have re-enrolled for the new year will have a space reserved.)

Student's Name _____ Date _____

Grade Entering _____ Date of Birth _____ SS# _____ - _____ - _____

If PreK or JrK, please check: Full-time ___ 3 full days ___ 2 full days ___ AfterCare needed ___

Address _____

City _____ State _____ Zip _____

Home Phone _____ E-mail _____

Mother's Name _____ Work Phone _____ Cell _____

Father's Name _____ Work Phone _____ Cell _____

Third Person in case of Emergency _____ Phone _____

Person(s) NOT AUTHORIZED to pick up child _____

Person(s) AUTHORIZED to pick up child: _____

My child WILL _____ WILL NOT _____ be using bus transportation next year.
(Bus service is limited and available only in mornings and certain parts of Leesburg.)

I can provide a car pool _____, AM ___ PM ___. I need a car pool _____, AM ___ PM ___.

(Please fill out the medical form on the back of this form. Add and update any important medical information you deem important for our school files, including updated immunizations required.)

By signing below, I promise to read the LCS handbook on the LCS web site and agree to have my child abide by these policies. (Those who do not have access to internet must let the office know so the handbook can be mailed to them.) I also agree to continue to have my child educated according to the Biblical philosophy of education as stated in the handbook. In signing, I also promise to pay all tuition payments in a timely manner.

Signature of parent or guardian _____ Print Name _____ Date _____

Application fee of \$125 MUST accompany this form or application will not be processed or space reserved. New students who are siblings MUST pay the charges listed on the 2010-2011 LCS tuition sheet. After March 1, registration for PRESENT students will increase to \$175. A late registration fee of \$225 will be charged after May 1.

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www.leesburachristianschool.org



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Student/Parent/Faculty Agreement (for grades 7-12 only)

I promise to uphold the standards of the school in dress and conduct. I will in honesty and good spirit, accept correction in these areas knowing it will be given for my benefit.

I will abstain from use of tobacco (smoking or dip and other nicotine products), drugs, profanity, vulgar language, alcoholic beverages, immorality (including sexual activity), gossip, lying or talking critically about others, malicious or careless destruction or property, stealing, ungodly music, ungodly dances, and any other activity inconsistent with my Christian testimony.

I will work diligently on all class work, striving for the highest grade I can possibly make. I will always do my own work and not cheat. I will not help another student cheat.

As a student at Leesburg Christian school, I will act in an orderly and respectful manner, maintaining Christian standards in courtesy, kindness, morality and honesty at all times, even when away from the school. I will remember that how I act away from school reflects on the Lord Jesus Christ and reflects on the testimony of Leesburg Christian School.

I will do my best to stay close to the Lord through attending a Bible-believing church, reading my Bible regularly (hiding the Word in my heart) and praying, and telling others about the Lord.

I will honor my parents as the Bible instructs me to do, and will honor the teachers at Leesburg Christian School as well. I will attend all functions I am required to attend and in proper attire.

I agree to abide by the above standards and other regulations expected of students enrolled at LCS. I will not give the impression to students, parents or faculty that I am not in harmony with the goals or standards of Leesburg Christian School.

This contract must be signed or initiated yearly by the student and is applicable, signed or not, each year student is enrolled.

Student Signature

Print Name

Date

Parent/Guardian Signature

Print Name

Date

By signing this form, all seniors agree to participate in special activities and projects specifically designed for their senior year (college trip, senior trip, senior gift to school, Christian Nation paper, etc.)

Eighth Grade	Ninth Grade	Tenth Grade	Eleventh Grade	Twelfth Grade

21336 Evergreen Mills Road · Leesburg · Virginia · 20175

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Monday, February 1, 2010



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AUTHORIZATION TO GIVE MEDICATION

Student's Name: _____ Date: _____

Leesburg Christian School has my permission to administer the following drugs and medications:

Drug Name and/or Prescription Number: _____

Dosage Amounts: _____

Times to be given: _____

Special instructions, if any: _____

MAY LCS ADMINISTER ROUTINE MEDICAL TREATMENTS (TYLENOL, IBUPROFEN, AND BANDAGES)?

_____ YES _____ NO (The office will **attempt to contact Parent/Guardian before administering.**)

LEESBURG CHRISTIAN SCHOOL AGREES TO NOTIFY THE PARENT/GUARDIAN WHEN HIS/HER CHILD BECOMES ILL, AND THE PARENT/GUARDIAN AGREES TO PICK UP THE CHILD AS SOON THEREAFTER AS POSSIBLE.

The parent(s)/guardian authorizes **Leesburg Christian School** to obtain immediate medical care and/or hospitalization of, the performance of necessary diagnostic tests upon, the use of surgery on, and/or the administration of drugs to, his/her child or ward if any emergency occurs when he/she cannot be located immediately. It is also understood that this agreement covers only those situations which are true emergencies and only when he/she cannot be reached. Otherwise he/she expects to be notified immediately.

This authorization is effective until _____ Signature of Parent/Guardian _____

MEDICAL INFORMATION

Child's Allergies (if any) _____

Child's Doctor _____ Telephone Number _____

Family Doctor _____ Telephone Number _____

Medicine Child is taking: _____ Date of last Tetanus Shot: _____

Outstanding Medical History (ex. Diabetes, Heart Disease, etc.) _____

INSURANCE INFORMATION (LCS not responsible if student has no coverage from personal insurance)

Insurance Company _____ Id No./Policy No. _____ Group# _____

Insurance Company Address _____

Subscriber's Name _____ Subscriber's Place of Employment _____

Subscriber's Telephone Number _____

If your child needs to be sent home from school due to a local emergency (snow, tornado, etc.), and you should not be home, to whom may he/she be sent? (If more than one, please state)

Name _____ Address _____ Phone _____

If you do not have access to a radio during one of these emergencies, please note:

Where we can reach you _____ or guardian _____

I AUTHORIZE LCS TO ALLOW MY CHILD(REN) TO PARTICIPATE IN ALL FIELD TRIPS.(THIS INCLUDES PARTICIPATION IN JV OR VARSITY SPORTS EVENTS, IF MY CHILD IS A TEAM MEMBER).

Parent Signature _____ Date: _____

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Tuition Schedule for 2010 - 2011

Application Fee	\$50 (due with application, non-refundable)
Parent/Student Interview	\$25 (due at time of interview)
Registration Fee	\$225 (all registration fees non-refundable)
Re-enrollment Fee	\$125 (non-refundable) beginning February 1 (\$175 after March 1, \$225 after May 1)

PAYMENT METHODS AND INFORMATION

- Ten (10) monthly installments (due 1st of month beginning August 1, \$100 per year charge).
- Four (4) installments due August 1, November 1, January 1, and March 1 (\$40 per year charge).
- Semester payments due August 1, January 1 (\$10 per year charge).
- Payment in full due August 1.
- Supply/Book fees due July 1 (non-refundable). If not paid by July 15, fee will increase \$50.
- Late fee for tuition is \$25 or 2%, whichever is larger, after 10th of each month.
- There is a 2% late fee each month on all other charges. There is a \$25 charge for each returned check.

REFUNDS: The quarter up to and after a withdrawal date will not be refunded or will be due if not already paid.

THERE ARE NO REFUNDS FOR EXPELLED STUDENTS OR FOREIGN STUDENTS

VOLUNTEER POLICY: LCS relies on parental cooperation and involvement. We will be asking all parents to either help in an area of their expertise for approximately 1 hour per month (10 hours per year) or donate \$100. Also, at least one parent is required to attend the regular Parent – Teacher Fellowships (PTF), which may be used as volunteer hours.

Tuition	Books/ Materials	Insurance/ Yearbook	Stanford/ PSAT Tests	Activity/ Supply Fee	Total Fees Due	Tuition 1st Child	Tuition 2nd Child	Tuition 3rd Child	Tuition 4th Child
*Pre-Kindergarten Full Day	\$120	\$30 / \$35	N/A	\$35	\$220	\$6,100	\$5,500	\$4,700	\$2,000
*Junior Kindergarten Full Day	\$120	\$30 / \$35	N/A	\$35	\$220	\$6,100	\$5,500	\$4,700	\$2,000
Part-Time PreK and JrK Only (No more than 3 full days or equivalent)	\$120	\$30 / \$35	N/A	\$35	\$220	\$4,100			
*Senior Kindergarten Full Day	\$175	\$30 / \$35	N/A	\$35	\$275	\$6,100	\$5,500	\$4,700	\$2,000
Elementary 1st - 6th Grades	\$240	\$30 / \$35	\$25 (Stanford)	\$35	\$365	\$6,100	\$5,500	\$4,700	\$2,000
Junior High 7th and 8th Grades	\$250	\$30 / \$35	\$25 (Stanford)	\$50	\$390	\$6,300	\$5,700	\$4,900	\$2,000
**High School 9th - 12th Grades	\$325	\$30/ \$35	9th - Stanford only \$25 10th/11th Stanford & PSAT \$40	\$50	9th - \$465 10th - \$480 11th - \$480 12th - \$440	\$7,100	\$6,000	\$5,200	\$2,000

* LCS requires that all children be 3, 4, 5 or 6 years old by September 30 to enter PreK, JrK, SrK and 1st grade respectively.

* Original birth certificates and a completed Virginia State health form must accompany application for all kindergartners.

Note: Recommended tutoring during school hours will have an extra charge.

Keyboarding	\$30	Band/Strings	\$350
Computer Apps.	\$30	Choir	\$30
Graphic Design	\$55	Drama	\$40
All Science Courses	\$50	Art	\$35

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MISCELLANEOUS FEES:

- PE uniform \$25 (3-12 grades),
 - H.S. Graduation \$175 (includes cap, gown, diploma, graduation reception, school gift, etc.)
 - Varsity Sport \$175 (third season, \$50)
 - Junior Varsity Sport \$150 (third season, \$25)
- (Parents of team members must commit to help raise funds for uniforms, refs, and field charges as needed.)
- High School retreat \$125 (approximate cost due at time of event)

FOREIGN STUDENTS:

LCS has been issued an I-17 and has authorization to accept I-20 students. If interested, please access www.leesburgchristianschool.org/foreignstudentadmission.html and download the applications and handbook. *I-20 students have a separate tuition schedule.*

BUSING RATES:

	*Leesburg Town AM Only
First Child Door to Door	\$1,000
Second Child	\$650
Third Child (and on)	\$400

***BUSING:** LCS reserves the right at any time to raise busing rates or to discontinue a bus run. Not all locations in the town of Leesburg will qualify for a bus pick-up. Private car pools may be available. There is a \$5 charge for occasional bus riders. ***LCS determines the boundaries that cover the Leesburg town route.**

CAR SEATS: Parents must provide proper car seats for children eight (8) and under. We must meet state regulations.

LOW INCOME SCHOLARSHIPS: There are funds available for low income families who meet certain criteria. Inquire for an application in the school office.

Note for members of Believers Baptist Church: There is a discount in tuition available for tithing members who have been members for at least a year.

AFTERCARE:

Yearly AfterCare rates. \$100 deposit with sign-up for requested hours..	
Until 4 p.m.	\$600
4:30	\$1000
5:00	\$1500
5:30	\$2000
6:00	\$2500
6:30	\$3100
Daily Drop-In Rates, for occasional users:	
from 3:30-6:30	\$6 per hour until 5:30, then \$7 for final hour

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PAYMENT METHODS & VOLUNTEER HOURS

Name: _____ Date: _____

- I prefer to pay monthly (enclosed is \$100—\$50 if automated from parent's bank)
- I prefer to pay in full (due August 1)
- I prefer to pay by the semester (due August 1 and January 1, \$10 fee)
- I prefer to pay in four quarterly installments (payments must be received by August 1, November 1, January 1, and March 1, \$40 fee)
- I prefer to pay on my Visa or MasterCard (call Kim Beall at 703.777.4220 for instructions).

VOLUNTEER SECTION (Please check areas below where you can help)

- Enclosed is my \$100 donation for the school year.
- I prefer to volunteer 10 hours throughout the year.
- (There will be a \$10 per hour charge for any incomplete volunteer hours—parent?)
- Lawn work Painting Vacuuming Dust/Wipe Shoveling snow/Mulch
 Substitute Lunch aide Phone calls Room mother/father

SIGN-UP FOR AFTER CARE

Name of child(ren): _____

Name of parent (print): _____ Phone: _____
 Please register my child for this time slot: _____. After Care charges are as follows:

Yearly AfterCare rates. \$100 deposit with sign-up for requested hours.	
Until 4 p.m.	\$600
4:30	\$1000
5:00	\$1500
5:30	\$2000
6:00	\$2500
6:30	\$3100
Daily Drop-In Rates, for occasional users:	

I understand that I will be paying \$100 that will be applied toward my child's After Care hours. Enclosed is \$_____ toward the cost of After Care. (Parents are asked to pay in advance of school starting.)

Children must be picked up by 6:30 pm.
Parents will be charged \$6 for every 5 minutes after 6:30 pm.

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