



Slave Lake Koinonia Christian School

328 2nd Street NE
Slave Lake AB T0G 2A1
Established 1993

Student Enrollment Package

Please fill in all the information in this booklet and return it to the school to reserve your child's place at our school. The pages of this package are listed here for your convenience along with any documentation you will need to send along with this book. Please fill in all the information requested and sign the forms where indicated. You may use this index as your checklist.

✓ Please make sure you have all the required information

- Page 3 Student Enrollment Form – **include a copy of Vital Statistic form** (Birth Certificate etc.)
- Page 4 Parent / Guardian Information
- Page 5 Student Medical Information
- Page 6 Emergency Contact Information
- Page 7 Education History - include a copy of latest Report Card
- Page 8 Additional Information
- Page 9 Parents Commitment
- Page 10 Statement of Faith
- Page 11 Consents for Personal Information
- Page 12 Aboriginal Self-Identification
- Page 13 Cell Phone Policy (to be signed by students who have cell phones)
- Page 14 Student's Pledge (for students in grades 7 – 12)
- Page 15 Annual Permission Form
- Page 16 Other Fees (for information only)
- Page 17 Family Tuition Form - one form per family
- Page 18 Tuition Method of Payment Form - include cheque(s) or other payment information
- Page 19 Pastor Reference Letter
- Photocopy of Birth Certificate
- Photocopy of last two report cards minimum from previous school.

If you have any questions regarding this form, please contact the school office at 780-849-5400 or email admin@slkcs.com.





Student Enrollment Form

LEGAL Name as shown on Canadian Vital Statistics Document:

LEGAL Last Name: _____

LEGAL First Name: _____

LEGAL Middle Name(s): _____

Birth Date: _____ Gender: Male Female
(MM / DD / YYYY)

Kindergarten students must be born in 2013 or earlier.

If student does not normally go by their legal name, indicate below:

Preferred Last Name: _____ **Preferred** First Name: _____

OFFICE USE ONLY:

ASN: _____

\$50 Registration Fee

Interview Completed

Acceptance Letter

Received CUM

Copy of Birth Certificate

ADDRESS

Street Address: _____

City/Town: _____ Province: _____ Postal Code: _____

Mailing Address: ___ same as street address **OR** _____

City/Town: _____ Province: _____ Postal Code: _____

Home Phone Number: _____ Cell Number: _____

CITIZENSHIP (Check one):

- ___ Canadian Citizen
- ___ Permanent Resident / Landed Immigrant -- Expiry Date: _____
- ___ Visiting Student -- Student VISA Expiry Date: _____
- ___ Child of a Canadian Citizen (student not a Canadian citizen)
- ___ Child of a Permanent or Temporary Resident of Canada -- Expiry Date: _____
- ___ Other, please specify: _____

Note: A Vital Statistics Document indicating proof of the students' status must accompany this registration to verify the student's legal name, citizenship and birth date. Vital Statistics Documents include Canadian Birth Certificate, Canadian Citizenship Certificate, Canadian Adoption Certificate, Passport, Visa, or Permanent Resident card or Landed Immigrant Document.

It is the parents' responsibility to notify the school of any changes to your child's information.

What language is spoken at home? _____
Last School Attended: _____ Grade: _____

Siblings:	Name	Age	School



Parent/Guardian Information

We are the: Parents Guardians Foster Parents

Marital Status of Parents: Married Widowed Separated Divorced

Single Common Law

Mother's Information:

Last Name: _____ First Name: _____

Mailing address (If different from student): _____

City: _____ Province: _____ Postal Code: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

E-mail address: _____

Place of Employment: _____ Occupation: _____

I am the parent of this child by (please check one):

___ Birth/Adoption ___ Joint Custody ___ Divorce Decree ___ Court Order ___ Foster ___ Guardianship

Father's Information:

Last Name: _____ First Name: _____

Mailing address (If different from student): _____

City: _____ Province: _____ Postal Code: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

E-mail address: _____

Place of Employment: _____ Occupation: _____

I am the parent of this child by (please check one):

___ Birth/Adoption ___ Joint Custody ___ Divorce Decree ___ Court Order ___ Foster ___ Guardianship

Custody Information (If applicable):

If there is a legal guardian, other than the above, please indicate:

Guardian &/or Caseworker Name: _____

Address: _____ Phone: _____

Who has legal access to the student (in cases where an order exists)? _____

If a custody or restraining order exists, a copy is required for the student's file for the order to be enforced.

Please indicate if any such order exists. Yes No

If yes, please submit a copy with this application.



Student Medical Information

Please provide the following information to assist us in reacting appropriately and facilitating your child's needs on a daily basis or in the case of an emergency.

Please indicate if your child has any of the following. If your answer is yes, please give details in space below your answer.	
Student's Name	
Student's Alberta Health Care Number	
Allergies <small>(please list all allergies)</small>	Yes / No
Epi-pen <small>(Epi-pens must be handed in to the office.)</small>	Yes / No
Inhaler or Puffer	Yes / No
Medications/Dosage <hr style="width: 50%; margin: 0;"/> <small>(please specify)</small>	Yes / No
Other conditions	Yes / No
Do you give the school permission to administer Tylenol (Acetaminophen) or Advil (Ibuprofen) or their generic counterparts to your children if needed? ___ Yes ___ No Please sign: _____ Please indicate the dosage each of your children may have of these tablets. We have chewable Junior strength, and Regular strength of each type of pill. (Ex: 2 Jr. or 1 Reg.)	
Tylenol (Acetaminophen)	
Advil (Ibuprofen)	
In case of an injury to your child in which the school is unable to contact you, do you authorize the school to engage the services of a doctor and/or ambulance as seems appropriate and agree to pay whatever fees are incurred in such cases? ___ Yes ___ No If yes, please sign: _____ Doctor: _____ Phone Number: _____	

The above information is complete and correct to the best of my knowledge.

Parent Name: _____ Parent Signature: _____

Date: _____



Emergency Contact Information

At Slave Lake Koinonia Christian School **we always contact parents first** if there is an emergency with your child. In the event we can't reach you, please give us some emergency contacts.

Student's Name

As the legal parents/guardians of the child mentioned above, we give the following people as alternate contacts for our child in the event we cannot be contacted. We do hereby authorize these people to be emergency contacts and/or pickup our child from SLKCS as indicated below.

Please supply a minimum of Two Emergency Contacts. It is your responsibility to contact us regarding any changes you wish to have made to this form.

Emergency Contact Information		
Contact #1		
First and Last name		
Relationship to student (i.e. Aunt, Neighbour, Grandmother, Friend)		
Phone number (circle which type) Home Work Cell	#	
Please indicate if they may also pick up your child	___ Emergency Contact	___ May Pick up Child
Contact #2		
First and Last name		
Relationship to student (i.e. Aunt, Neighbour, Grandmother, Friend)		
Phone number (circle which type) Home Work Cell	#	
Please indicate if they may also pick up your child	___ Emergency Contact	___ May Pick up Child
Contact #3		
First and Last name		
Relationship to student (i.e. Aunt, Neighbour, Grandmother, Friend)		
Phone number (circle which type) Home Work Cell	#	
Please indicate if they may also pick up your child	___ Emergency Contact	___ May Pick up Child

Parent Name: _____ Parent Signature: _____

Date: _____



Education History

Please fill out the following information to the best of your knowledge. We desire to ensure that your child will fit into our school and that we will be able to meet his/her needs.

Please include a copy of your child's last two (2) report cards with this enrollment package.

Child's Name: _____ Expected Grade: _____

Previous School: _____

Do we have permission to contact your child's previous school? Yes No

Kindergarten

Did your child attend Kindergarten? _____

Has your child repeated Kindergarten? _____

Were there any concerns? _____

Did the teacher recommend that he/she is/was ready for grade 1? _____

Academic Achievement

Does your child struggle with any of the following subjects and if so, how?

Math: _____

Science: _____

Social Studies: _____

English: _____

Phys. Ed.: _____

Other: _____

Is your child currently on a Modified or Adapted Program? _____

Please explain: _____

Have you requested that your child not participate in an approved school program? _____

Was your child ever recommended for testing and as a parent(s) you refused? _____

Please explain: _____

Has your child ever skipped a grade? _____ If so, which grade? _____

Has it ever been recommended that your child repeat a grade? _____ If so, which one? _____

Testing Results and Supports

Please indicate if your child has had any of the following types of tests done in their previous school:

Psychological Hearing Speech Irlen Syndrome

Has your child had any of the following:

Behavioral Plan Emergency Intervention Plan

Individualized Program Plan (IPP) Occupational Therapy

Was any other testing done at a previous school? _____ If yes, please explain: _____

Are there any outstanding reports for which you are awaiting results? _____

Has your child received any special diagnosis? _____

If so, please explain: _____

Has your child received any extra assistance such as an Educational Assistant or other supports? _____



Additional Information

How did you hear about our school? _____

If you were referred, who we can thank? _____

Do you personally know families currently enrolled at SLKCS?

Has your family been previously involved in a Koinonia School? _____

Please explain your reason for wanting to enroll your children in a Christian School and, if applicable, why you are leaving your previous school.

CHURCH INFORMATION *(This info will also be used to invite your pastor to our school):*

Church name: _____

Church location: _____

Pastor's Name: _____ Phone Number: _____

Are you attending church weekly? If no, please explain:

Please list how you are involved in your Church and/or community:

Dad: _____

Mom: _____

Please give the enclosed Pastor's Report to your Pastor, or someone you have known for a while who can speak to your church involvement, and have them return it to us as indicated on the form.

DECLARATIONS:

Please carefully read the following statements and sign below, if you agree with them:

1. I hereby certify that the foregoing statements are true and complete to the best of my knowledge. (Falsified applications are grounds to deny the application or remove children from school.)
2. I hereby grant Slave Lake Koinonia Christian School the right to verify these statements through inquiry with employers, pastors, previous schools, etc.
3. I hereby agree that should a dispute or legal claim ever arise between the undersigned and Slave Lake Koinonia Christian School or its representatives, I/we will not take the issue before a court of law, but will resolve it before Christian believers.

Father's Signature: _____ Mother's Signature: _____

Date: _____



Parents Commitment

Rationale:

The school exists as a support to Christian homes in fulfilling their mandate to raise children in the nurture and admonition of the Lord. The strength and effectiveness of the school will be largely determined by the dedication and spiritual maturity of the parents whose children are enrolled. It is therefore essential that a certain level of commitment be given by each parent before enrolling their children.

Policy:

At least one custodial parent or guardian must agree with all of the points which follow. A custodial parent or guardian who cannot support all the points must at least agree with and be supportive of points five through fifteen.

- | | |
|---|--|
| <ol style="list-style-type: none"> 1. I have received the Lord Jesus Christ as my personal Saviour and am actively involved in a church which accepts the Bible as the Word of God. 2. I acknowledge that the Bible places primary responsibility on parents especially fathers, for the education of their children, and am requesting this school to assist me in this God given responsibility. (Dt. 6:4-9, Pr. 22:6, Eph. 6:4) 3. I have read and fully accept the Statement of Faith as my own. 4. I will pray earnestly for the school, its families, board, teachers, and administrators.
----- 5. I will immediately support the ministry of the school when I am able by assisting with various activities as needed. 6. I will serve as a Classroom Support Worker as required or pay for my substitute. 7. I will support the moral standards of the school and uphold them outside of the school as well as in the school (see moral conduct policy). 8. I authorize the school to employ such discipline as it deems wise and expedient for the training of my child(ren). 9. I will immediately seek to resolve misunderstandings privately with the person(s) (i.e. faculty, staff, Board members, other parents) involved in accordance with the principles of Matthew 18. | <ol style="list-style-type: none"> 10. I accept that the school reserves the right to dismiss any child who fails to comply with the established regulations and discipline, or whose financial obligations remain unpaid, or who refuses to co-operate with the academic process. I understand that in the case of an expulsion of my child(ren) no other board (public or independent) is obligated to accept my child(ren) mid-year and that in such cases the school's only obligation for the remainder of the year will be to provide support for a home-based program (e.g. Home School, Distance Ed. Virtual). 11. I understand that faithful attendance at Parent-Teacher Meetings and Parent-Teacher Connection meetings are vital to building a strong school. I will make every effort to attend both. 12. I hereby pledge to pay my financial obligations to the school. 13. I understand that tuition does not cover the full costs of educating my child(ren) and will raise a minimum of \$250 (\$100 for Kindergarten only families) either through fundraising or additional payments. 14. I agree to support the school, staff, students on social media, and understand I need to address issues or concerns internally and privately within the school. 15. I agree that my family will volunteer for a minimum of one work bee per school year, and will do my best to help on short notice when required. |
|---|--|

Please sign below and indicate your level of agreement with these statements by checking the appropriate box.

FATHER:

- I agree with **ALL** the statements of the Parents Commitment
- I agree with statements **5 through 13** of the Parents Commitment

Printed Name

Signature

MOTHER:

- I agree with **ALL** the statements of the Parents Commitment
- I agree with statements **5 through 13** of the Parents Commitment

Printed Name

Signature



Statement of Faith

1. We believe that the Bible, containing the 66 books of the Old and New Testaments, is the only inspired, inerrant, infallible Word of God and is the final authority on the Christian faith and life. (II Timothy 3:16; II Peter 1:21).
2. We believe there is only one God, who exists eternally in three equal persons — Father, Son, and Holy Spirit — and who created out of nothing the heavens and the earth and all that is in them by the power of His spoken word (Genesis 1:1; Genesis 1:26; Psalm 33:6; Matthew 28:19; John 1:1-3; Mark 1:9-11; Hebrews 11:3).
3. We believe that Jesus Christ is both true God and true man (Exodus 3:13-15 and John 8:58-59; John 1:1-18; John 10:30-33; Galatians 4:4-5; Philippians 2:5-8; Hebrews 2:14-18). We believe in His virgin birth (Isaiah 7:14; Matthew 1:18-23; Luke 1:26-35); His sinless life (Hebrews 4:15; Hebrews 7:26); His miracles (John 2:11); His substitutionary death (Romans 4:25; Romans 5:8; Galatians 3:13-14; Hebrews 2:9); His physical resurrection (Luke 24:39-43; I Corinthians 15:1-22); His ascension to the right hand of the Father (Mark 16:19; Luke 24:50-53); and His personal, visible, and bodily return in power and glory to judge the living and the dead (Acts 1:11; Revelation 20:11-15; Revelation 22:12).
4. We believe that men and women were created by God in His own image (Genesis 1:27; Genesis 9:6), that marriage was instituted by God whereby a man and a woman are joined together in lifelong commitment to faithful companionship, and that Biblical marriage is the only legitimate and acceptable context for sexual intimacy (Genesis 2:20-24; Matthew 19:4-6; Romans 7:2; I Thessalonians 4:1-8; Hebrews 13:4). We believe that all men and women are born spiritually separated from God because of sin (Genesis 3:23-24; Romans 3:10-12; I John 1:8-10), and are incapable of being reconciled to God apart from the work of Jesus Christ (Romans 5:6-8; Acts 4:12; Ephesians 2:1-5).
5. We believe in the absolute necessity of rebirth by the Holy Spirit for salvation (John 3:1-3; I Peter 1:23). We believe that man is justified (declared righteous) by God on the single ground of the righteousness of Jesus Christ (namely, His sacrificial and atoning death on the cross to pay the penalty for sin, and His perfect obedience) freely given to all who believe in Him. We believe that this saving work and perfect righteousness of Jesus Christ can only be received by faith alone (Isaiah 53:1-12; Jeremiah 23:6; Matthew 20:28; John 3:16-19; John 5:24; Romans 3:21-26; Romans 4:1-3; Romans 5:8-19; Romans 10:1-10; I Corinthians 1:30; II Corinthians 5:21; Galatians 2:21; Ephesians 2:8-9; Philippians 3:7-9; I John 4:10).
6. We believe in the physical resurrection of both the saved and the lost. Those who are saved will rise to eternal life, and those that are lost to eternal punishment (Matthew 16:27; John 5:28-29; Matthew 25:46; I Corinthians 15:12-17).
7. We believe that the Church is the body of born-again believers in fellowship with Christ and with fellow believers (I Corinthians 12:12-13; Ephesians 2:19-21; Hebrews 10:25).
8. We believe in the presence and power of the Holy Spirit, who indwells believers enabling them to live a Godly life (Romans 8:13-14; I Corinthians 3:16; I Corinthians 6:19-20; Ephesians 2:10; Ephesians 5:15-21).

While Koinonia Schools acknowledge and respect the legitimate differences that exist within evangelical theology, only the above doctrines will be taught as truth in our schools.

Please sign to indicate you have read this Statement of Faith and are in agreement with it:

Father's Name: _____ Father's Signature: _____ Date: _____

Mother's Name: _____ Mother's Signature: _____ Date: _____



Consents for Use of Personal Information for 2018 - 2019

The **Personal Information Protection Act** (PIPA) protects the personal information of the public and employees of private sector organizations operating in Alberta. It governs the collection, use and disclosure of personal information by organizations in a manner that recognizes and balances the right of an individual to have his or her personal information protected, and the need of an organization to collect, use or disclose personal information for purposes that are reasonable. Slave Lake Koinonia Christian School (SLKCS) respects the right to privacy and uses or discloses personal information in accordance with the provisions of this Act. Please indicate your agreement by completing the following sections.

General Education Consent (Internal) *Valid from August 1, 2018, to July 31, 2019*

I, _____, consent to allow SLKCS and its employees to collect, release, use or disclose personal information concerning my children: _____
for educational purposes by SLKCS, its employees, and service providers, including but not limited to report cards, achievement tests, portfolio assessments, counseling, behavioral and special needs assessments, vaccination or immunization, yearbook photos, academic & sports achievements, phone lists, etc. I further agree that my name, address, and telephone number will be made available to **SLKCS families for purposes of communication and fellowship**.

Signature: _____ Date: _____

Public Relations/Marketing Consent (External)

Throughout the year, your children may be photographed so that we can share the exciting things that are going on at the school with the surrounding community. Please indicate below if you give permission for us to use your child's photograph for any of the publications listed.

Classroom Yes No

Hallway Displays: Yes No

SLKCS Newsletter: Yes No

SLKCS Website: Yes No

SLKCS Facebook/Twitter: Yes No

School Advertising (Posters, Banners etc.): Yes No

Community Newspapers/Websites: Yes No

Signature: _____ Date: _____

Dispute Resolution Agreement

Your signature below indicates that you agree to resolve any disputes with Slave Lake Koinonia Christian School (SLKCS), KCES, or its representatives without resort to a court of law, and SLKCS will also hold itself to this agreement.

Father's Name: _____ Father's Signature: _____ Date: _____

Mother's Name: _____ Mother's Signature: _____ Date: _____



Aboriginal Self-identification

Student's name: _____

If Student is Aboriginal, please declare, please select one:				
First Nation (status) <input type="checkbox"/>	First Nation (non- status) <input type="checkbox"/>	Métis <input type="checkbox"/>	Inuit <input type="checkbox"/>	Band Name: _____ Band Number: _____ Treaty Number: _____
<p>For further information, please refer to: https://education.alberta.ca/system-supports/results-reporting/ or contact Alberta Education at 780-427-8501.</p> <p>If you have questions regarding the collection of student information by the school board, please contact the School Board Superintendent Mr. Vern Rand at 403-227-3182.</p> <p>If you have questions regarding the collection of student information by the school, please contact the principal, Mrs. Elizabeth Lund at 780-849-5400 or email her at elizabeth.lund@slkcs.com.</p>				

Student or Parent/Guardian Signature: _____ Date: _____



Cell Phone Policy

(To be signed by all students with cell phones who are enrolled at SLKCS)

Preamble

Slave Lake Koinonia Christian School (SLKCS) understands that cell phones are used extensively in our society. The use of this technology by students at SLKCS during school hours creates a challenge in the school environment. In order to address this challenge the following Cell Phone Policy has been developed and approved by the Board.

Policy

Cell phones are not to be carried on your person but may be stored in your locker, car, or with your homeroom teacher during school hours. They must be turned off during school hours. School hours are as follows:

Monday to Friday, 8:15 am - 3:30 pm

Students who need to use a phone during the school day may use a phone in their class, with permission from their teacher or use the one in the office.

Consequences

Consequences for violating this policy are as follows:

1st offence: Cell phone confiscated from student and returned to student at the end of the day with a discipline notice.

2nd offence: Cell phone confiscated from student. Parents of the student are contacted. The cell phone is returned to the parents of the student and SLKCS cell phone policy will be explained to the student and the parents.

3rd offence: Cell phone confiscated. Parents of the student are contacted. The phone is returned to the parent of the student and the student is no longer allowed to have a cell phone on school property, during school hours, for the remainder of the semester.

4th offence: Cell phone confiscated. Parents of the student are contacted. The student will receive a 3-day suspension from school. A re-admission meeting involving the student, parents of the student and school administrator will be required. In that re-admission meeting the condition of re-enrolment will be communicated to the student and parents of the student.

Student Name: _____ Student Signature: _____ Date: _____

Parent Name: _____ Parent Signature: _____ Date: _____



Student's Pledge

(To be completed by all students in grades 7 - 12)

OUR MISSION: Slave Lake Koinonia Christian School exists to provide children with an education which will enable them to know, love, and effectively serve Jesus Christ in the world.

OUR GOAL therefore is to equip young people with the knowledge, attitudes, and skills which will enable them to become mature, productive members of society and effective witnesses for the Lord.

Not every student benefits from our school, nor does the school benefit from every student. However, when the intentions and values of the student match those of the school, it can be a very successful and rewarding experience for both. We therefore ask students in grades seven through twelve to determine whether or not they are in agreement with the school before enrolling each year.

Please read the following statements and sign below if they accurately reflect your desires and intentions.

1. I DESIRE to attend SLKCS and see the School's Mission fulfilled in me personally.
2. I INTEND to make Jesus Christ Lord of every area of my life and accept the Bible as my standard for judging right from wrong.
3. I INTEND to treat all students, teachers, and parents with equal kindness and respect.
4. I INTEND to abide by the school's rules and accept the consequences without complaint when I fail to comply.
5. I INTEND to approach every subject with a positive attitude and complete all my assignments to the best of my ability.
6. I INTEND to behave in such a way that brings honour to God, to SLKCS, to my family and to others through all that I do. This would be seen through lifestyle choices such as church and youth group attendance, dress, audio/video and social media, books, speech, hobbies, dating, alcohol, tobacco, drugs, etc.

Student's Printed Name: _____

Student Signature: _____ Date: _____

I have discussed the contents and implications of the Students' Pledge with my child and will support him or her in abiding by it.

Parent Name: _____ Parent Signature: _____ Date: _____



Annual Permission form for all Trips within Slave Lake

Consent of Parent/Guardian and Acknowledgement of Risk

Valid from August 1, 2018 to July 31, 2019

INFORMATION

Dear Parent/Guardian:

Your son/daughter will be involved in a variety of activities, which involve the student leaving the school grounds by bus, parent/staff drivers or on foot. School policy requires the school to have the consent of parents each time the student leaves the school grounds. Rather than send home a permission slip for every activity, we are asking for your cooperation in completing this annual permission form, which will cover all activities within the Town of Slave Lake (these include but are not limited to: Parks within the town, Multi Rec Centre(MRC), etc.). Any field trips outside the Town of Slave Lake will continue to be dealt with using individual event forms. Should you have any questions, please contact the school at 780-948-5400.

SCHOOL RESPONSIBILITIES

The school will make every reasonable effort to ensure or ascertain that:

- a. There is adequate staff or volunteers and/or service providers involved are suitably trained and qualified.
- b. The students are adequately supervised over all aspects of the program/activity.
- c. The location(s) used are appropriate and safe for the activity and group.
- d. Equipment used has been inspected and deemed appropriate and safe.

POTENTIAL HAZARDS

Potential known hazards include but are not limited to the following: injuries related to falls, insects, animals, water, mud, and other outdoor hazards.

CONSENT AND ACKNOWLEDGEMENT OF RISK

1. Modes of Transportation: School Bus, parent/staff drivers or walking
2. I accept these modes of transportation for activities and/or transport within the Town of Slave Lake during the 2017-2018 School year: **Yes** **No**
If No: I permit my child to use alternate means of transportation. Specify means: _____
3. I acknowledge my right to obtain as much information as I require about this program or activity and associated risks and hazards, including information beyond that provided to me by the school.
4. I freely and voluntarily assume the risks/hazards inherent in the program/activity and understand and acknowledge that my child may suffer personal and potentially serious injury due to an unforeseeable event associated with his/her participation.
5. My child has been informed that he/she is to abide by the rules and regulations, including directions and instructions from the school's and/or service provider's administrators, instructors, and supervisors over all phases of the program/activity.
6. In the event my child fails to abide by these rules and regulations, disciplinary action may require his/her exclusion from further participation, or that I be contacted to have him/her picked up, unless I have specified other transport arrangements.
7. I acknowledge that it is my responsibility to advise the school of any medical and/or health concerns of my child which may affect his/her participation in the stated programs or activities.
8. I consent that the school, through its employees, agents and officers may secure such medical advice and services as they deem necessary for my child's health and safety, and that I shall be financially responsible for such advice and services.

Based on my understanding, acknowledgement, and consents as described herein, I agree that _____ (Name of Student) has my permission to participate in activities within the Town of Slave Lake and can be transported as indicated above as they relate to their enrollment at Slave Lake Koinonia Christian School.

Family Name: _____ Date: _____

Parent Name (Please print): _____ Signature: _____

This form will remain on file and function as a general permission form for the dates indicated above or until rescinded in writing by a parent or guardian.

Please note: All parent volunteers must have a current Police Record Check and Confidentiality Agreement on file with the SLKCS office.



Other Fees

These are some of the other fees associated with enrollment at our school. They are shown here for your information.

New Registration Fee: A **\$50 non-refundable fee per student** is due when you submit your enrollment form.

Deposit: A **non-refundable deposit** of first month's tuition will also be required upon acceptance. This can be used towards September's tuition.

Supply Fee: A **\$75 supply fee per student** will be added to your tuition. This fee covers agendas, art supplies, and most of the school supplies.

Tax Receipts: Tax receipts are issued once a year. If someone is assisting you with your tuition payments but we receive the money from you, the tax receipt for the tuition & fees will still go to you. If you want the receipt to go to the person helping you, SLKCS must receive the money directly from that person.

Early Withdrawal: Families who leave between July 1, 2018 and June 23, 2019 will be subject to a 10% withdrawal fee on their base tuition and/or Kindergarten fee.

Extra-Curricular Activity Fees - Students have the option to participate in extra-curricular activities throughout the school year. These fees are for your information and will be collected at the start of each activity's season. Permission forms for these activities will also be sent out.

Sports Jerseys are mandatory for all students participating in after school sports programs. Order forms will be sent home at the start of each activity.

With the new carbon tax implemented by government, our bills will also rise and reflect this. This is a one-time annual fee to offset these costs to the school at \$100 per family

All students are required to have a school issued supplies and agenda to keep track of homework and/or assignments at \$75 per student. This fee also includes pencils, pens, lined paper, art supplies, binders, notebooks, etc.

Other Possible Fees		
Sports team	\$30	Required for all students in grades 7 – 9. Students are to supply their own black shorts or athletic pants for gym class and athletic activities. Clothing must be in accordance with our Dress Code Policy.
Swimming	\$40	All students in grades 1-8 are required to participate in swimming lessons as part of our P.E. program. Swim wear must be in accordance with our Dress Code Policy (no bikinis). (Subject to change and bus fees).



Family Tuition Form 2018 - 2019

One form per family, if you have filled this information in on a sibling's registration form, please indicate the child's name: _____

Family Name:	Phone #: Email:
Do you have a child you wish to enroll in Kindergarten for Next year (2019 - 2020)? Yes / No	

FAMILY WITH CHILDREN IN KINDERGARTEN THROUGH GRADE 12							
	1st Child	2nd Child	3rd Child	4th Child	5th Child	6th Child	Kindergarten
Tuition or Kindergarten Fee	\$1760	\$1560	\$1510	\$1200			\$500

FAMILY ENROLLMENT (List oldest child first)							
Student Last Name	Student First Name	Age as of Aug. 1/18	GR.	Tuition (or ECS Fee)	Supply fee (\$75/student)	Total for Each Child	For Office use only
Carbon Tax						\$ 100.00	
Subtotal						\$	\$
(Payment for deposit must accompany this form) Less Deposit						\$	\$
(Please transfer this amount and indicate your Method of payment on the next sheet) Total						\$	\$



Tuition Method of Payment Form

Total Tuition/Fees as calculated on Family Enrollment Form: \$ _____

Tuition and fees are payable to SLKCS. Payment Options are indicated below.

- ___ 1) 1 payment - attach one cheque post-dated September 1, 2018
- ___ 2) 2 equal payments - attach two post-dated cheques dated Sept. 1, 2018 and January 15, 2019
 \$ _____ chq # _____ \$ _____ chq # _____
- ___ 3) 10 Monthly payments - starting Sept. 1, 2018 using auto-withdrawal. Attach a void cheque and sign below. \$ _____ per month

Please sign below to indicate your authorization for automatic withdrawal. Attach a void cheque or banking information to ensure our records are updated correctly.
 I/We hereby authorize Slave Lake Koinonia Christian School to debit my/our account ten payments for the tuition/fees as indicated above. Such payments are to be made on the first day of each month beginning September 1, 2018.

Signature(s): _____ / _____ Date: _____

NOTE: SLKCS REQUIRES BOTH PARENT'S SIGNATURES ON JOINT BANK ACCOUNTS

Pre-authorized Credit Card Payment(s) - Please note: there will be a 4% processing fee added to your tuition if you choose this form of payment. You may pay by Credit Card using one of these three options:

Total Tuition from above \$ _____ + 4% = \$ _____

- ___ 4) 1 payment \$ _____
- ___ 5) 2 equal payments \$ _____ (Sep. 1, 2018) and \$ _____ (Jan. 15, 2019)
- ___ 6) 10 monthly payments \$ _____ on the first day of each month from Sep 1, 2018 to June 1, 2019

Credit Card Number:

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Expiry Date:

M	M	Y	Y
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CVC Code (3 digit code on the back of the card)

			<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard
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I hereby authorize Slave Lake Koinonia Christian School to charge my Tuition/Fees indicated above to my credit card:

Card Holder's Signature: _____ Date: _____

Families who leave between July 1, 2018 and June 23, 2019 will be subject to a 10% withdrawal fee on their base Tuition/Kindergarten fee.

Office Use Only: Deposit: _____ Invoice: _____ Chq # _____ Auto: _____



Confidential PASTOR’S REFERENCE FORM

*New families – Please ask your pastor or spiritual leader to complete and send to the school.

Name of Church: _____

Address of Church: _____

Phone Number/e-mail address: _____

Name of Family

Dear pastor, the above family has applied for enrolment at **Slave Lake Koinonia Christian School**. Part of the application process entails confirmation of the family or student is involved in a church or desire to grow spiritually. As a spiritual leader, please fill in this form as confidential information for their application.

Father: How long have you known him? _____ Does he attend your church regularly? _____

Is he actively involved in church work? _____

Has he accepted Christ as his personal Saviour? _____

Mother: How long have you known her? _____ Does she attend your church regularly? _____

Is she actively involved in church work? _____

Has she accepted Christ as his personal Saviour? _____

What responsibilities does this family have in the church? _____

To your knowledge, has each child received Jesus Christ as his or her personal Saviour? _____

Is this family supportive of your ministry and the church? _____

Do you feel this family will be supportive of Christian education? _____

Please list the ways you think the student(s) would benefit from being in a Christian school. _____

Pastor’s Name: _____

Pastor’s Signature: _____ Date: _____

Pastor, please return this form or a reference letter to:
Slave Lake Koinonia Christian School, 328- 2St. NE, Slave Lake, AB
Box 1548, Slave Lake, AB, T0G 2A0; Fax: 888-881-0428; e-mail: admin@slkes.com
If you have any questions, please call 780-849.5400. Thank you.