

**Heritage Christian School  
3585 Thruston-Dermont Road  
Owensboro, KY 42303  
(270) 685-4002**

**Registration Form  
2019-2020**

THIS SECTION FOR OFFICE USE ONLY

Date Received \_\_\_\_\_ Registration Fee \_\_\_\_\_

PLEASE COMPLETE THE FOLLOWING **FOR EACH STUDENT**

Child's Name

Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

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

Phone \_\_\_\_\_ Date of Birth \_\_\_\_\_ Age as of 8/1/19 \_\_\_\_\_

Sex: Male \_\_\_\_\_ Female \_\_\_\_\_ Race \_\_\_\_\_ Student's SS# \_\_\_\_\_

Parent's e-mail address \_\_\_\_\_

*Grade or Program to enter:*

*Two Day Preschool – Tues/Thurs* \_\_\_\_\_ *Three Day Preschool – Mon/Wed/Fri* \_\_\_\_\_  
*(3 year olds)* \_\_\_\_\_ *(4 year olds)* \_\_\_\_\_

*Kindergarten* \_\_\_\_\_ *First Grade* \_\_\_\_\_ *Second Grade* \_\_\_\_\_

*Third Grade* \_\_\_\_\_ *Fourth Grade* \_\_\_\_\_ *Fifth Grade* \_\_\_\_\_

*Sixth Grade* \_\_\_\_\_ *Seventh Grade* \_\_\_\_\_ *Eighth Grade* \_\_\_\_\_

If your child has attended a school prior to Heritage Christian School, please give the name, address of the school and dates attended:

\_\_\_\_\_

\_\_\_\_\_

Father's Name  
Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Country or state of birth \_\_\_\_\_

Name of the local church you attend \_\_\_\_\_

Employment \_\_\_\_\_

Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Mother's Name  
Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Country or state of birth \_\_\_\_\_

Name of the local church you attend \_\_\_\_\_

Employment \_\_\_\_\_

Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Name of person assuming financial responsibility for this student:

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

If your child lives with only one parent, please complete the following:

Name of parent with whom child does NOT live \_\_\_\_\_

Full Address \_\_\_\_\_

Phone \_\_\_\_\_

Grandparent Name(s) \_\_\_\_\_

Full Address \_\_\_\_\_

Grandparent Name(s) \_\_\_\_\_

Full Address \_\_\_\_\_

(If more room is needed, please use the back of the last page of this registration form.)

**Emergency/Medical Information**  
***Please Complete In Full FOR EACH STUDENT***

**Child's Name** \_\_\_\_\_ **Grade** \_\_\_\_\_ **Date of Birth** \_\_\_\_\_

**Parent's e-mail address** \_\_\_\_\_  
**(Please include e-mail address on this page as well as the first page of the application form.)**

**PARENT/GUARDIAN Emergency Contacts**

Name \_\_\_\_\_ Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

**IN CASE OF EMERGENCY**, and parent cannot be reached, please give names, addresses, and phone numbers of two **ACCESSIBLE** relatives or friends:

Name \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

If your child has any health problems (allergies, asthma, diabetes, etc.) **PLEASE** list them below. Please indicate if any of these conditions limit your child's physical activity.

---

---

---

Please list **ANY** medications that your child takes regularly:

---

---

Please mark the medications that your child may receive from the school office:

Junior acetaminophen (160 mg) Yes \_\_\_ No \_\_\_ Adult acetaminophen (500 mg) Yes \_\_\_ No \_\_\_

Junior ibuprofen (100 mg) Yes \_\_\_ No \_\_\_ Adult ibuprofen (200 mg) Yes \_\_\_ No \_\_\_

Child's Physician \_\_\_\_\_ Phone \_\_\_\_\_

Other children in the family:

Enrolled in HCS

Yes/No

Name \_\_\_\_\_ Birth Date \_\_\_\_\_

\_\_\_\_\_/\_\_\_\_

Name \_\_\_\_\_ Birth Date \_\_\_\_\_

\_\_\_\_\_/\_\_\_\_

Name \_\_\_\_\_ Birth Date \_\_\_\_\_

\_\_\_\_\_/\_\_\_\_

Name \_\_\_\_\_ Birth Date \_\_\_\_\_

\_\_\_\_\_/\_\_\_\_

Please explain why you would like your child enrolled in Heritage Christian School.

---

---

---

---

---

---

---

Has your child ever been treated for any learning disabilities or behavior problems?

Yes \_\_\_\_/No \_\_\_\_

Does your child have (or have they ever had) an IEP (Individual Education Plan)?

Yes \_\_\_\_/No \_\_\_\_

Has your child ever been suspended, placed on disciplinary probation or expelled?

Yes \_\_\_\_/No \_\_\_\_

If you answered yes to any of the above questions, please explain briefly.

---

---

---

---

---

---

---

**PARENTS, PLEASE READ AND SIGN BELOW**

I have read **ALL** the materials concerning enrollment and the student handbook. I agree with the educational, disciplinary, and moral policies of Heritage Christian School and will support the administration with regard to these policies. The foundation for every policy is the unchanging, inspired, and inerrant Word of God, which is always a "lamp to our feet and a light to our path." If I have a problem, question, or concern with the school, I will contact my child's teacher or the school administration. Heritage Christian School reserves the right to discontinue enrollment of any student whose lifestyle, conduct, influence, attendance, or progress is not in keeping with the moral and academic standards of the school.

I understand my financial obligations toward the school, and will be faithful in my prompt payment of scheduled fees. I will notify the school administration if special financial problems arise. Please understand that Heritage Christian School maintains the right to refuse readmission of any student whose account is seriously delinquent.

I hereby give my permission for my child to participate in all school activities, including off-campus field trips. I also give my permission for agents of Heritage Christian School to authorize emergency medical treatment for my child. I will assume full responsibility for the cost of such treatment.

Signed \_\_\_\_\_ Date \_\_\_\_\_ Signed \_\_\_\_\_ Date \_\_\_\_\_  
(If child lives with both parents, both signatures are required.)

\*\*\*\*\*

**Letter of Intent**

The following letter of intent is an important part of your child's registration. Signing this letter will not guarantee your child a place, but it will increase the likelihood that he/she will be accepted as a student. This letter is an indication of your intent, barring unforeseen circumstances, to keep your child at Heritage Christian School through the eighth grade. This letter of intent will apply to all students registering for preschool through seventh grade.

We the parents/guardians of \_\_\_\_\_  
do hereby indicate our sincere intent to keep our child in Heritage Christian School through the eighth grade.

Signed \_\_\_\_\_ Date \_\_\_\_\_

\*\*\*\*\*

**Student Photo Release**

Do you grant permission for the publishing of the student's photograph and or/student work done by the child named above on Heritage Christian School's website and social media sites or on school advertising? \_\_\_\_\_ Yes \_\_\_\_\_ No

Do you grant permission for Heritage Christian School to release the student's photograph and/or student work done by the child named above to local area newspapers, understanding that such newspapers may print your student's name in full along with any such photographs and/or student work, and that Heritage Christian School has no control over non-school media sources and their use of your child's likeness, name, or photograph? \_\_\_\_\_ Yes \_\_\_\_\_ No

Signed \_\_\_\_\_ Date \_\_\_\_\_

**Please return this re-enrollment form along with registration fee to the school office.**