

**Registration Checklist:**

- \_\_\_ Application for Admission (Signed Parental Agreement)
- \_\_\_ Emergency Information Card *(The office has copies of these)*
- \_\_\_ Authorization for Release of School Records *(if applicable)*
- \_\_\_ K-4 Before/After Care Registration *(if applicable)*
- \_\_\_ Media Release Form
- \_\_\_ Copy of Birth Certificate
- \_\_\_ Copy of Social Security Card
- \_\_\_ Copy of Immunization Record
- \_\_\_ Registration Fee

Today's Date: \_\_\_\_\_

# TRI-COUNTY CHRISTIAN ENROLLMENT APPLICATION

## STUDENT INFORMATION

NAME \_\_\_\_\_  
(Last) (First) (Middle)

ADDRESS \_\_\_\_\_  
(Street Address) (City) (State) (Zip)

DATE OF BIRTH \_\_\_\_\_ SOCIAL SECURITY # \_\_\_\_\_

ENTERING CLASS/GRADE *(Circle All Applicable)*

NURSERY (6 weeks +)	TODDLER (18m-30m) Not potty trained	PEE-WEE (2-3 yr/o) Fully potty trained	MIDDLER (3-4 yr/o)	PRE-K (4-5 yr/o) Preference: AM or PM <i>First come, first served</i>
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GRADE: K 1 2 3 4 5 6 7 8

OTHER: K-8 Before School / K-8 After School

PHONE: \_\_\_\_\_ Secondary: \_\_\_\_\_ Other: \_\_\_\_\_

Student regularly attends church at \_\_\_\_\_

## FAMILY INFORMATION

Student lives with: Both Parents Mother Father Guardian

Father/Guardian Full Name \_\_\_\_\_ SSN: \_\_\_\_\_

Occupation Details \_\_\_\_\_  
(Occupation) (Employer Name & Address)

Mother/Guardian Full Name \_\_\_\_\_ SSN: \_\_\_\_\_

Occupation Details \_\_\_\_\_  
(Occupation) (Employer Name & Address)

Church & Minister \_\_\_\_\_

Father: Member? \_\_\_\_\_ Attend Regularly? \_\_\_\_\_ Have you received Christ as your Savior? yes / no

Mother: Member? \_\_\_\_\_ Attend Regularly? \_\_\_\_\_ Have you received Christ as your Savior? yes / no

List Parent(s) not in the Home: \_\_\_\_\_  
(Name) (Phone)

Parent's Email Address \_\_\_\_\_

Siblings in	Name	Gender	Age
the home.	_____	_____	_____
	_____	_____	_____

----- QUESTIONNAIRE -----

Please share why you desire to enroll your child in a Christian School/Daycare.

1. How did you hear about Tri-County Christian School? \_\_\_\_\_

2. Did a current TCCS family refer you to our grade school? If so, please list their name:  
\_\_\_\_\_

3. List previous schools/daycares, giving detail of enrollment, repeated grades, discipline concerns, etc.  
\_\_\_\_\_  
\_\_\_\_\_

4. Please comment on any unusual factors in the student's life \_\_\_\_\_  
\_\_\_\_\_

5. Has the student been expelled or disciplined beyond ordinary classroom or daycare situations? \_\_\_\_\_

Please explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

----- AGREEMENT OF PARENTS -----

In applying for enrollment of our child, \_\_\_\_\_, we understand the policies as stated in the handbook, understand that any portion of installment paid to TCCS is non-refundable, and are willing to cooperate with Tri-County Christian School Board & Staff in:

- Statement of Faith
- Admission Requirements
- Business, Health, Phone, Transportation, & Visitor Procedures
- Dress Code & Discipline Procedures
- Additional Elementary School Information & Procedures

We also hereby give permission for our child to participate in Tri-County activities and absolve the school from liability of any injury my child may sustain during school related activities and functions. I further pledge my support and agreement with the standards of conduct and discipline of TCCS as stated in the Handbook.



X \_\_\_\_\_  
(Signature of Father/Guardian) (Date)

X \_\_\_\_\_  
(Signature of Mother/Guardian) (Date)



TRI-COUNTY CHRISTIAN SCHOOL  
604 HBC ROAD, MACON, MO 63552  
PHONE: (660) 385-7188  
WWW.TRICOUNTYCHRISTIANSCHOOL.ORG  
ADMIN@TRICOUNTYCHRISTIANSCHOOL.ORG

## Parent consent for release of student photographs, video images, recordings, and creative works.

There are several occasions throughout the school year when the school or individual classroom teachers will have cause to photograph or videotape classroom or school-related activities. These images (including student photographs, videos, artwork, writing and other creative works) may be published or distributed through printed or electronic media, including the school Facebook web site. Images may also be released to local media to highlight important or interesting stories associated with the school district. Some common uses of student images include but are not limited to: **promotion of clubs, activities or classroom projects; recognition of achievement; promotion of school programs; or celebration of academic or artistic qualities.**

You are receiving this letter to request permission for Tri-County Christian School to publish images of your child on the TCCS Facebook web site or in printed materials. Please indicate your preference below:

Student's Full Name: \_\_\_\_\_

For the purposes stated in this letter,

- I **DO** give permission for photographic or video depictions of my child(ren) to be published in school-related materials, used on school web pages, or shared with the media as needed.
- I **DO NOT** give permission for photographic or video depictions of my child(ren) to be published in school-related materials, used on school web pages, or shared with the media.

\_\_\_\_\_  
(Parent/Guardian Signature)

\_\_\_\_\_  
(Date)



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## Transfer of School Records

\_\_\_\_\_ is applying for enrollment into the \_\_\_\_\_ grade  
(Student's Name)

at Tri-County Christian School. I authorize & request \_\_\_\_\_  
(School/Agency Name)

to release all official school records including, but not limited to:

- Grades to date of request
- Health records
- Test scores
- Discipline reports
- Psychological or comprehensive evaluations
- I.E.P. or Special Education records

\_\_\_\_\_  
(Signature of Parent or Guardian)

\_\_\_\_\_  
(Date)

Please send correspondence to:  
Tri-County Christian School  
604 HBC Road  
Macon, MO 63552  
Fax: 660-385-7011  
admin@tricountychristianschool.org