STEPS TO ADMISSION

- 1. Read carefully through all material noting any questions you may have.
- 2. We encourage you to make an appointment to visit/tour our school.
- 3. Fill out the entire registration packet and return it to the school office with the following:

* Non-refundable registration fee (\$50 per student)

* Copy of immunizations record on an IRIS form.

- * Copy of recent physical. Physicals are required for all new GRCS students and all K3, K4 and K5 students
- * Children are typically tested one time for lead at age one. A recorded date needs to be on their physical form or a test administered if necessary.

* Copy of most recent report card

- 4. The principal will review all materials submitted.
- 5. An interview with both parents, if possible, and the student will be scheduled with the principal. All parents and students will be expected to:

* Accept and conform to the guidelines established in the Great River Christian School

Student Handbook

- * Recognize without reservation Great River Christian School's right to uphold its Statement of Faith and to fulfill its mission.
- 6. An appointment will be made to screen and/or test the student.
- 7. Upon acceptance of your student(s), you will receive a copy of your contract along with payment information.

Notice of Nondiscrimination

Great River Christian School admits students of any race, color, or national or ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national or ethnic origin in the administration of the educational process, admission policies, scholarship and loan programs, or other school-administered programs.

EAGLES
Educating for Eternity

Great River Christian School
426 Harrison Avenue
Burlington, IA 52601
Phone (319)753-2255
Fax (319)753-2030
office@greatriverchristianschool.org
www.greatriverchristianschool.org

Great River Christian School

NAME(S) OF ALL CHILDREN REGISTERING AT GRCS:

Family/Student Information Form ___ New student (\$50 each) Enrollment for school year 2021-2022 Returning student (\$50 per child if not re-registered by June 2, 2021) This form must be COMPLETED and returned to GRCS, along with the \$50 non-refundable application fee. All students are on a 6 week probationary period. PARENT/GUARDIAN NAMES _____ ADDRESS (father) CELL PHONE # (father) _____ CELL PHONE COMPANY____ EMAIL (father) PLACE OF EMPLOYMENT (father) _____ PHONE # ____ ADDRESS (mother) ____ CELL PHONE # (mother) _____ CELL PHONE COMPANY____ EMAIL (mother) ____ PLACE OF EMPLOYMENT (mother) _____ PHONE # ____ CHURCH YOU ATTEND _____ PASTOR _____

(circle one)

Male or Female grade _____ birth date ____

grade _____ birth date ____

grade _____ birth date

Male or Female grade _____ birth date ____

Male or Female grade _____ birth date ____

Male or Female grade birth date

FOR STUDENTS IN GRADES 1-12 NEW TO GRCS, PLEASE LIST NAME AND ADDRESS (if not local) OF SCHOOL YOUR CHILD(REN) ATTENDED LAST YEAR SO WE CAN REQUEST THEIR RECORDS TO BE TRANSFERRED:

_____ Male or Female

Male or Female

The primary form of communication with our parents is via email and/or text messaging. To ensure the GRCS office staff and faculty are able to properly reach you, we request your assistance in keeping your information updated. Parents will receive a Weekly GRCS Newsletter via email and other alerts via text/email.

(Please complete reverse side of this form)

Yes (please list student name and expla	ain below)No
If yes, please list name and explanation:	
•	
PUBLICATIONS RELEASE Great River Christian School has permission to and/or website. Yes No	use my studeut(s) name(s) and/or picture in GRCS publications
Great River Christian School has permission to bublications. No	use my student(s) name(s) and/or picture in public newspaper
EMERGENCY PHONE(S):	
Phone number	person answering/relationship to student
Phone number	person answering/relationship to student
PEOPLE WHO ARE ALLOWED TO PICK	UP YOUR CHILD(REN):
PEOPLE WHO ARE ALLOWED TO PICK	UP YOUR CHILD(REN):
PEOPLE WHO ARE ALLOWED TO PICK PEOPLE WHO ARE NOT AUTHORIZED To PEOPLE WHO PEOPLE WHO ARE NOT AUTHORIZED TO PEOPLE WHO ARE NOT AUTHO	TO PICK UP YOUR CHILD(REN): Ten attending GRCS listed on the front of this form, gitte in any field trip (in a vehicle or walking) sponsored pervised by GRCS personnel. I give permission for men the unlikely event of an accident or emergency. I consure the safety of our students and realize there is an ivity. I will not hold Great River Christian School or
PEOPLE WHO ARE ALLOWED TO PICK PEOPLE WHO ARE NOT AUTHORIZED To Great River Christian School and supshild(ren) to receive medical treatment is understand that every effort is made to endement of risk in any kind of trip or action of the staff and chaperones liable for	TO PICK UP YOUR CHILD(REN): Ten attending GRCS listed on the front of this form, go the in any field trip (in a vehicle or walking) sponsored pervised by GRCS personnel. I give permission for men the unlikely event of an accident or emergency. I consure the safety of our students and realize there is an ivity. I will not hold Great River Christian School or

Medical Consent, Prescription & Non-Prescription Medicine Authorization

Great River Christian School 426 Harrison Avenue, Burlington, IA 52601

SCHOOL YEAR: 2021-2022

Medical Consent

In case of a medical emergency when primary emergency contacts cannot be reached, Great River Christian School staff is granted permission to release medical and healthcare information, and to authorize medical staff to deliver services concerning my child(ren) listed below:

Student Name:		Student Name:	
Student Name:			
Student Name:	·		
Primary Ins:		Physician:	
Policy #:			
Dental Ins:			
Policy #:			
<u> </u>	rescription & No	n-Prescription Authorization	-
is no liability on the part of medication(s) to my child(n prudent person would have school only by a responsibl medication will be destroyed close of the current school of form, you MUST fill out a responsible of the current school of the cu	FGRCS, it's personnel, or en) when the person address acted under the same or le adult; (3) ALL MEDICAL if it is not picked up we year, whichever occurs for those medical interpretations.		ere
Signature:		Date:	
Home Ph.:	Ceil:	Cell:	

In the event of severe allergies, a separate form is available for you to fill out.

Please let us know.

Please fill out the reverse side for each student attending GRCS.

Student Name:	Stop Date:
Prescription/Non Prescription Medicati	ion:
	Side Effects:
Please administer according to label for	r recommended time schedule for the following conditions or symptoms:
	the above named student?
Student Name:	Stop Date:
Prescription/Non Prescription Medication	on:
	Side Effects:
Please administer according to label for	recommended time schedule for the following conditions or symptoms:
Are there allergy or health concerns for	the above named student?
Student Name:	Stop Date:
Prescription/Non Prescription Medication	on:
Dosage Amount:	Side Effects:
	recommended time schedule for the following conditions or symptoms:
	the above named student?
Student Name:	Stop Date:
Prescription/Non Prescription Medication	on:
	Side Effects:
Please administer according to label for	recommended time schedule for the following conditions or symptoms:
	the above named student?

Revised 04/24/2020

:



Iowa Department of Public Health Certificate of Immunization

F		·-	1	 Hepatitis B			뜡	mmenzae	Haemophilus		MMR.	Rubella	Mumps,	Meas				Y-V/OPY	Pollo										1d/Tdap	DIAP/DTP/DT/	Pertussis	Tetanus,	Diohtheria				Signature:	I certify that the	Parent/Guardian:	Name Lasc	
																																	Adume		A repre	Physician, Physician Assistant, Nurse, or Certified Medical Assistant		above named applicant			
																			,														nace elven	7	sentative of the loca	Certified Medical Assistant		has a record of a	Add		
																1010																	Doctor / Clinic / Source	7-1-1-20:	al Board of Health or Iowa Depar			I certify that the above named applicant has a record of age-appropriate immunizations that meet the requirement for	Address:	First:	
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			Other	AdH	Visite of	Human						Kacavi				1	Hecest					Maria					PCV/PI	Pneur	Varicella		or patient	Yario			Public He			## ## ##			
	,		Other	HPV		Human						Kotavirus					Hepatitis A			41 2	MOV4/MPSV4	Manimanana					PCV/PPV	Pneumococcal	Varicella*	of natural disease	If patient has a history	Varice la			Public Health may rev	! !		the requiremen		Middle:	
			Other	HPV	Virus							KOLAVITUS					Hepatitis A				MC/4/Mps/4	Markenson					PCV/PPV	Pneumococcal	Various systems of	of natural disease	Tripatient has a history	Yaricella.	Vaccine		Public Health may review this certificate for sur		Date	t the requirement for licensed child care		Middle:	
			Other	HPV	Virgo	Human						KULAVITUS					Hepatitis A				MCV4/MBSV4	Manistroposti					PCV/PPV	Pneumococcal	Variosimis of	of natural disease	To patient has a history				A representative of the local Board of Health or Iowa Department of Public Health may review this certificate for survey purposes.		Date:	licensed child care or schoo	Phone: (Middle: Date of Birth:	

GREAT RIVER CHRISTIAN SCHOOL FINANCIAL CONTRACT 2021-2022

Financial Responsibility

I/we are financially responsible for all tuition, fees and charges in accordance with the policies set forth in this contract, as they apply to the enrollment of the student(s) listed below. I/we understand that all references in this contract to tuition and fees refer to those charges set by the GRCS Board of Directors for the 2021-2022 school year.

Financial Commitment and Late Payments

The application fee of \$50 per child is due upon enrollment and is non-refundable. If paying tuition in full it is due by August 13th and a 1.75% discount will be applied (Available for full time K5-12th grades only). However, payment can be made in monthly installments as shown below. Tuition payments are due on the 13th of each month. If payment is not received by the 13th of the month, a \$35 late fee will be automatically assessed. Any account that is 30 days late will go before the School Board for review. A fee of \$25 will be assessed for any returned check.

Pastor Discount

A 20% tuition discount is offered to those whose primary vocation is full time ministry. This discount is not to be combined with any other discount and a letter of confirmation must be presented by the church board.

Tuition for Pre-Kindergarten

In order to retain your child's place in Pre-Kindergarten, the first month's tuition, book fees, and activity fee (all nonrefundable) must be paid by July 1st. If not paid by July 1st your child's place will be forfeited to the next family on the walting list.

	Annual	9 Month - (July-March)
K3 (Half Day) M,W,F	\$1,766.00	\$196.27
K3 (Full Day) M,W, F	\$2,774.00	\$308.22
K4 (Half Day) M – F	\$3,332,00	\$370.23
K4 (Full Day) M – F	\$4,287.00	\$476.32
•	,	411/4/02

Tuition for Full Time Students (Kindergarten-12th Grade)

	Annual	10 Month (August-May)	12 Month (Ed.)
One Full Time Student	\$5,129.00	\$512,94	12 Month (July-June)
Two Full Time Students	\$7,426,00.	\$742.63	\$427.45
Three Full Time Students	\$9,351,00	\$935.14	\$618.86
Four Full Time Students	\$11,208,00	\$1,120.85	\$779.28
Additional students beyond 4, ple		Office at office@greetwingshui_ti-	\$934.04

Additional students beyond 4, please contact the Business Office at office@greatriverchristianschool.org

Book Fees

Families have the responsibility for paying for their child's books through GRCS. These fees are in addition to your yearly tuition. Families will be charged rental fees and/or lab fees for classes and full-price for consumable workbooks.

Late Enrollment

Students enrolled after the first day of school will be billed by the number of days of instruction left in the school year. This pro-rated amount can then be divided by how many months are remaining to develop a payment plan through May.

Early Withdrawal

Tuition will be pro-rated to the date of departure. Any remaining balances will be due to the school immediately. School records will not be released until the balance is taken care of,

Great River Christian School Enrollment Application 2021-2022

Automatic Withdrawal Options I wish to have tuition payments ONLY automatically debited from my bank account. I wish to have tuition, lunch & childcare payments automatically debited from my bank account. Please Circle One: Checking or Saving (Please attach a voided check) Name of Bank: Routing/Transit #: Account Number: I hereby authorize GRCS to make credits or debits to my account listed above for the payment of tuition and/or other incidental charges that are incurred during the month. This transaction will be processed on the 13th of each month. Signature: Date: Fundraising and Contributions Tultion and fees cover approximately 50% of the total income required for the annual GRCS budget. The remainder of the annual budget must be funded by contributions and fundraising efforts. Parents/guardians will be asked to volunteer time and/or resources in further support of the school and its fundraising activities in order to meet this budget requirement. Participation in fundraising by each family is required. By accepting and signing this contract, the signer agrees to the schools statement of faith, student handbook, and the financial terms stated above. The signer also agrees to pay any fees incurred due to late or nonpayment of tuition and fees.	Responsible Party	
Address: City/State/Zip: Relationship to student(s): Email address: Student Name: Grade 2021-2022: Payment Options (choose one) I wish to pay the tuition in 12 (July-June) monthly installments. (K5-12th only) I wish to pay the tuition in 12 (July-June) monthly installments. (K5-12th only) I wish to pay the tuition in 10 (August-May) monthly installments. (K5-12th only) I wish to pay the tuition in 9 (July-March) months. (K3 & K4 only) Note: Application Fees are due at time of enrollment. Automatic Withdrawal Options I wish to have tuition payments ONLY automatically debited from my bank account. I wish to have tuition, lunch & childcare payments automatically debited from my bank account. Please Circle One: Checking or Saving (Please attach a voided check) Name of Bank: Routing/Transit #: Account Number: 1 hereby authorize GRCS to make credits or debits to my account listed above for the payment of tuition and/or other incidental charges that are incurred during the month. This transaction will be processed on the 13th of each month. Signature: Date: Fundraising and Contr/Butions Tuition and fees cover approximately 50% of the total income required for the annual GRCS budget. The remainder of the annual budget must be funded by contributions and fundraising efforts. Parentis/guardians will be asked to volunteer time and/or resources in further support of the school and its fundraising activities in order to meet this budget requirement. Participation in fundraising by each family is required. By accepting and signing this contract, the signer agrees to the schools statement of faith, student handbook, and the financial terms stated above. The signer agrees to pay any fees incurred due to late or nonpayment of tuition and fees.		Phone:
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	Signature:	Date:

BEFORE & AFTER SCHOOL CARE INFORMATION

Educating for

Eternity

Parents/Guardians:

By filling out our student information form, we will have the information we need for before and after school care. You may not anticipate ever needing care, but if something unexpected comes up and transportation for your child(ren) does not arrive, for the safety of our students, they will be placed in after school care.

Before and After School Care information is as follows:

• Care will be provided from 7:30 a.m. to 8:00 a.m. and from 3:15 p.m. to 5:30 p.m.

• Children here after 3:15 p.m. will be placed in child care.

You MUST pick your child up by 5:30 p.m.

Please call if there will be someone different picking the child(ren) up.

• Students from 6th grade and up are not charged but will be supervised in after school care. They are NOT allowed to babysit/be in charge of their younger siblings/friends in after school care.

The adult providing the care is an employee of Great River Christian School.

• Care is provided in our lunchroom. On nice afternoons, the children may be outside.

School rules and policies apply during this extended care.

- If you have school business to attend to when you pick your child up, you must either pick up your child(ren) and keep them with you at all times or leave them in after school care and be charged accordingly until you are ready to leave.
- Any 1/2 day child in preschool or pre-kindergarten not picked up by 11:30 a.m. or full time student not picked up by 5:30 p.m. will be charged a fee of \$5.00 per 15 minute increment. Please note: We have no designated care giver provided for this time.

The cost for this care is as follows:

- \$4.00 per hour for each child
- ◆ Late fee: \$5.00 per child for each 15 minute increment

Before and after school care is charged in 15 minute increments and billed monthly. When dropping off or picking your child up from school care the parent/guardian must sign their child(ren) in or out. Thank you!

Educating for Eternity

426 Harrison Avenue
Burlington IA 52601
Phone 319.753.2255
Fax 319.753.2030
office@greatriverchristianschool.org

STATEMENT OF FAITH

- 1. I believe the Bible to be the verbally inspired and only infallible, authoritative, inerrant Word of God. (2 Timothy 3:16, 2 Peter 1:21)
- 2. I believe that there is one God, eternally existent in three persons: Father, Son, and Holy Spirit. (Genesis 1:0, John 10:34, John 10:37-38)
- 3. I believe in the deity of our Lord Jesus Christ, in His virgin birth, in His sinless life, in His miracles, in His vicarious and atoning death through His shed blood, in His bodily resurrection, in His ascension to the right hand of the Father, and in His personal return in power and glory. (Isaiah 7:14, Matthew 1:23, Luke 1:35, Hebrews 4:15, John 2:11, Hebrews 9:12, Colossians 1:14, John 11;25, Acts 1:11, Revelation 19:11-16)
- I believe that man is sinful by nature and that regeneration by the Holy Spirit is essential and an absolute necessity for his salvation. (Romans 3:19-23, John 3:16-19, John 5:24, Ephesians 2:8-10, Titus 3:5-6)
- 5. I believe in the continuing ministry of the Holy Spirit by whose indwelling the Christian is enabled to live a godly life. (Ephesians 5:18, Ephesians 4:30, 1 Corinthians 3:16, 1 Corinthians 6:19-20)
- 6. I believe in the resurrection of both the saved and the lost. They who are saved into eternal life and they who are lost unto eternal damnation. (John 5:28-29)
- 7. I believe in the spiritual unity of believers in our Lord Jesus Christ. (Romans 8:9, 1 Corinthians 12:12-13, Galatians 3:26-28)
- 8. I believe in the creation of man by the direct act of God. (Genesis 1:26-28, Genesis 5:1-2

Please initial & sign below.

I am in agreement with Great River Christian School's purpose to prov	ide a program of Christian education
offering regular courses of study taught from God's perspective.	F8 or ourseners officeriol
I agree to the above printed Statement of Faith.	Wilder on
I desire for my child(ren) to be enrolled at Great River Christian School	
Signature (Parent/Guardian 1)	
Printed Name (Parent/Guardian 1)	Date
Signature (Parent/Guardian 2)	
Printed Name (Parent/Guardian 2)	Date

GREAT RIVER CHRISTIAN SCHOOL 2021-2022 School Event Calendar

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NOTICE: Every Wednesday - 2:30pm dismissal for students

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3	No School/FLEX DAY
4	Return to School
21	End of 2nd Quarter (43)

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2	Scripture Memory Assembly (K4-6th)
14	Valentines Day
21	No School/FLEX DAY

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March	
7	K3-K5 Screening Day / Round-Up
7-10	lowa Assessments
23	End of 3rd Quarter (42)
30	Scripture Memory Assembly (K4-6th)
29-31	Parent Teacher Conferences (by Request)

23 Days - MWF 13 - TTH 10

April	
8-9	Sr High Retreat
3	VIP Day - Noon Dismissal
4-15	Easter Break
8	No School/FLEX DAY
	Spring Picture Day
23	High School Formal
29	Spring Choir Concert
	18 Days - MWF 11 - TTH 7
May	THE RESERVE WHEN THE PROPERTY OF THE PROPERTY
	FUNDRAISER - Noon Dismissal
-	Scripture Memory Assembly (K4-6th)
20	K3-K5 Graduation
21	High School Graduation
7	End of 4th Quarter (44)
7	Last Day of School - Noon Dismissal
	20 Days - MWF 12 - TTH 8

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End of 4th Quarter (44	Last Day of School - No	20 Days - MWF 12 - TI

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171 Days / MWF 101 - TTh 70

13 Days - MWF 8 - TTH 5