**Revival Christian Academy**

Homeschool & Co-op

**New Family Enrollment Packet**

**2021/2022**

**Enrollment Fees**

**Step 1**: Enroll each of your students online at [www.revivalchristianacademy.com/enroll](http://www.revivalchristianacademy.com/enroll)

**Step 2**: Fill out and turn in this packet. Enrollment is NOT complete until packet has been turned in and verified by office staff.

**Yearly Enrollment Costs**

2021-2021/2022 school year

**Early Enrollment** (May 1 - June 15, 2021)

K-8 $75  
High School $100

**Standard Enrollment** (starts June 16, 2021)

K-8 $140  
High School $170

**Monthly Tuition**

*(Tuition is September through June.)*

One child: $50  
Two or more children: $55

**New Family Parent Check List**

**Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Father’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mother’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Grade\_\_\_\_\_Date of Birth\_\_\_\_\_\_\_\_

Student Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Grade\_\_\_\_\_Date of Birth\_\_\_\_\_\_\_\_

Student Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Grade\_\_\_\_\_Date of Birth\_\_\_\_\_\_\_\_

Student Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Grade\_\_\_\_\_Date of Birth\_\_\_\_\_\_\_\_

**EACH BOX MUST BE CHECKED IN FOR THIS APPLICATION TO BE COMPLETE**

\_\_\_\_\_ I have enrolled through Praxi ([www.revivalchristianacademy.com/enroll](http://www.revivalchristianacademy.com/enroll)).

\_\_\_\_\_ Copy of Birth Certificate for each child enrolling.

\_\_\_\_\_I have applied for HSLDA membership & provided school office with proof.

\_\_\_\_\_I have completed this packet.

\_\_\_\_\_ I have provided a copy of my child’s Immunization record copy.

\_\_\_\_\_ I have paid Enrollment online in parent portal.

\_\_\_\_\_I have a family interview with Director.

**KINDERGARTEN (available in the Revival Christian Academy Office)**

\_\_\_\_\_Oral Health Assessment or waiver

\_\_\_\_\_Report of Health Exam or Waiver

**SCHOOL POLICIES: PARENTS & CHILDREN**

**Please read the following statements. If you are in agreement and will abide by these policies, initial on each line and sign at the bottom and return with your registration fees**.

\_\_\_\_\_\_\_Due to the ambiguous political legal position of private home educating programs, we understand that the school cannot offer legal immunity and is only providing school services to assist parents in the schooling of their children.

\_\_\_\_\_\_\_We agree to become members of either HOME SCHOOL LEGAL DEFENSE ASSOCIATION

\_\_\_\_\_\_\_We agree that at least one parent will attend the monthly teacher’s meetings. We understand that **more than two absences and our family can be dismissed from the program**.

\_\_\_\_\_\_\_We realize that although the school is keeping our children’s records, it is in no way responsible for their actual education and we will not place blame on the PSP for failing that purpose.

\_\_\_\_\_\_\_We have read the School’s Statement of Faith (on our website) and we are in agreement with it. We understand that the Christian faith is the basis of this organization.

\_\_\_\_\_\_\_We understand that when our children attend school-sponsored activities, the parents are required to attend with their children (K-6)and are responsible for their safety, supervision and abide by the Code of Conduct (found in the Revival Christian Academy Handbook).

\_\_\_\_\_\_\_**We understand that failure to pay tuition for more than two consecutive months without notifying school of extenuating circumstances can result in automatic dismissal**.

\_\_\_\_\_\_\_We attend church regularly (at least three Sunday’s a month). Name and location of church\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_We understand that I, my spouse and my child must have accepted Jesus Christ as their personal Lord and Savior.

\_\_\_\_\_\_\_We have read and agree with Revival Christian Academy’s **Statement of Faith** <http://www.revivalchristianacademy.com/about/statement-of-faith/>

**We understand that our responsibilities as parents are as follows**:

\_\_\_\_\_\_\_Both parents must be in agreement concerning home study and are responsible for reading the **Revival Christian Academy Handbook** located on our website <http://www.revivalchristianacademy.com/about/handbook/> . We are fully responsible for knowing the information in the **Handbook.**

\_\_\_\_\_\_\_Parents agree to diligently and consistently teach their student(s) a reasonable course of study and provide parental supervision **during school hours**, generally 8-2 pm M-F.

\_\_\_\_\_\_\_The School will supply record-keeping forms. Parents will keep records and provide reports to school as required. **If reports are delinquent, late fees will be imposed.**

\_\_\_\_\_\_\_Parents will provide and pay for their own Christian curriculum.

\_\_\_\_\_\_\_**I understand that monthly tuition is due the first of each month and I will be billed a late fee of $10.00 after the 5th of the month.**

\_\_\_\_\_\_\_**I am responsible to attend monthly meetings and that if I miss more than 2 I will be assessed a fee of $25.00 and risk being dropped from the program**.

\_\_\_\_\_\_\_**I understand that I will be assessed a $25.00 late fee per child, if paperwork is not turned into Revival Christian Academy by set due dates, without a two-week prior notice extension approved and in writing to the Revival Christian Academy Office.**

**CONSENT TO POLICY**

We have read the above policies and agree to abide by them. It is understood that the services of the PSP are engaged by mutual consent and that either we or the school reserve the right to terminate any and all services at any time by written notification.

Father’s Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mother’s Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Revival Christian Fellowship**

**Standard Personal Release Form**

The undersigned enters into this Agreement with Revival Christian Fellowship (“Producer”). I have been informed and understand that Producer is producing a videotape and/or internet live stream program as well as print material and that my name, likeness, image, voice, appearance and performance is being recorded and made a part of that production (“Product”).

1. I grant Producer and its designees the right to use my name, likeness, image, voice, appearance and performance as embodied in the Product whether recorded on or transferred to videotape, film, slides, photographs, audio tapes, live web-cast or other media, now known or later developed. This grant includes without limitation the right to edit, mix or duplicate and to use or re-use the Product in whole or part as Producer may elect. Producer or its designees shall have complete ownership of the Product in which I appear, including copyright interest, and I acknowledge that I have no interest or ownership in the Product or its copyright.

2. I also grant Producer and it’s designees the right to broadcast, exhibit, market, sell and otherwise distribute the Product, either in whole or in parts, and either alone or with other products, for commercial or non-commercial television or theater, closed-circuit exhibition, home video distribution or any other purpose that Producer or its designees in their sole discretion may determine. This grant includes the right to use the Product for promoting or publicizing any of the uses.

3. I confirm that I have the right to enter into this Agreement, that I am not restricted by any commitments to third parties, and that Producer has no financial commitment or obligation to me as a result of this Agreement. I hereby give all clearances, copyright and otherwise, for the use of my name, likeness, image, voice, appearance and performance embodied in the Product. I expressly release and indemnify Producer and its officers, employees, agents and designees from any and all claims known and unknown arising out of, or in any way connected with, the above granted uses and representations. The rights granted Producer herein is perpetual and worldwide.

4. In consideration of all of the above, I hereby acknowledge receipt of reasonable and fair consideration from Producer.

**I have read the foregoing and understand its terms and stipulations and agree to all of them.**

Student’s Name *(Please Print)* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I hereby certify that I am the parent or legal guardian of the participant named above and I give my consent without reservation to the foregoing on behalf of him or her.

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Signature of parent or guardian)*

**Teacher/Parent Information *(please print)***

School Year: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Family Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Father’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Mother’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student will be taught by *(name)* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name, address & phone of secondary teacher *(other than parent)*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Primary location of school will be *(address)(*Where will you be teaching?)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

As a private school, **we are required by law**, to keep on file the qualifications of our teachers. For all new and continuing members, please list your qualifications (include all schools attended, degrees, credentials, teaching experience, other education or related experience such as Sunday school teacher training, etc.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Special Circumstances**

Have any of your students ever skipped or repeated a grade? **YES NO**

*If yes, list your student’s name(s) and grades they skipped or repeated. Briefly describe circumstance.*

Do any of your students have an IEP or a 504? **YES NO**

*If yes, list student’s name(s). Please explain.*

Have your students ever received any special tutoring? **YES NO**

*If yes, list student’s name(s). Please explain.*

**Disciplinary Problems**

Have any of your students ever been suspended, expelled or asked to withdraw from a school? **YES NO**

*If yes, list student’s name(s). Please comment on circumstance.*

Have any of your students had any problems with any type of drugs, alcohol, or tobacco?

**YES** **NO** if yes, list student’s name(s). Please explain.

**Home School Legal Defense Association** (*Membership Required for kids age 6 and up)*

Family Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you currently a member ofHSLDA? **YES NO**

If so, what is your renewal date? *(month/year)* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What is your number?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ***(you are required to submit a copy of your membership card along with this form)***

You are required to join Home School Legal Defense Association (HSLDA). The only exceptions are families whose enrolled children are under 6 years of age or have reached age 18. Failure to do so will result in termination of your enrollment at Revival Christian Academy.

I promise to pay any HSLDA renewal fee by the first of the month in which it is due. I realize that failure to do so terminates my enrollment at Revival Christian Academy retroactive to the HSLDA expiration date.

HSLDA (Home School Legal Defense Association) - [www.hslda.org](http://www.hslda.org)  
Revival Christian Academy Group Number for discount: 299745

**Doctrine of Education Worksheet**

Family Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_

A “Doctrine of Education” is basically your beliefs about education. In essence we want to know WHY you are choosing to home educate. What is the motivational force behind your efforts? On days when you are struggling you must be able to go to this statement and remember WHY you are doing this.

Here are some thoughts and challenges:

(Taken from the Elijah catalogue). In the lives of the Davis family, who operate the Elijah ministry, they state, “In our own lives, as we began understanding the different influences on education, God challenged us with a host of questions”:

1. **What if we look at education in a different way?**
2. **What if we start viewing it not as a commodity; but as an outworking of the convictions and priorities of our family?**
3. **What if we see it as part of the “equipping of the saints . . .for the work of service?”**
4. **What if we operate under a different set of assumptions than institutional education?**
5. **Assumptions like:**
   1. **God has created our particular family unit and given us our particular children because our family has a unique, God ordained meaning and purpose.**
   2. **God has put in our hearts the convictions and values that make up our family’s unique meaning and purpose.**
   3. **These convictions and values make up the core of the kind of people we want our children to become.**
   4. **Our education of our children reflects these convictions and values.**
   5. **God will stay actively involved in the proves for our children’s sakes.”**

The definition of *education* according to Webster’s 1828 Dictionary:

*“The bringing up, as a child; instruction; formation of manners. Education comprehends all that series of instruction and discipline which is intended to enlighten the understanding, correct the temper, and form the manners and habits of youth, and fit them for usefulness in their future stations. To give children a good education in manners, arts and science, is important; to give them a religious education is indispensable; and an immense responsibility rests of parent and guardians who neglect these duties.”*

With all of these items to think on here are several questions that will help you write this:

1. **What is Education?** Some verses to help: John 17:17, Psalm 111:10, Proverbs 9:10, 2 Timothy 3:16, Proverbs 16:16

2. **What is your family’s belief about education? What is its purpose?** Proverbs 22:6, Titus 1:9, 1 Peter 3:15, 2 Timothy 2:15

3. **What do we believe about parental rights and responsibilities concerning education?** Proverbs 22:6, Psalm 127:3-5, 2 Timothy 3:15

1. **What is your family’s purpose for home schooling?**

**Educational Goals**

Please list at least two to three goals per student that you would like to focus on for the next school year:

**Child Name Goals**

-

-

-

-

-

**Transfer of Records for New Students**

If your child has previously attended another school, we will send for his/her cumulative record file. Please fill in the following information ***COMPLETELY*** for last school attended.

**Legal Name of Student Birthdate Grade in Fall Last School Attended** (name, address, city, zip code & phone)

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**FOR OFFICE USE ONLY**

Cum Files requested on\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Charged Contracts\_\_\_\_\_

Forms added\_\_\_\_

Enrollment complete in Praxi\_\_\_\_\_\_\_