

# 2023-2024 WCS PRESCHOOL - 12th GRADES ENROLLMENT APPLICATION

Today's Date: \_\_\_\_\_ Grade Level for 2023-2024 \_\_\_\_\_ Child's Birth Date \_\_\_\_\_ Age \_\_\_\_\_

STUDENT INFORMATION: Check One: New Student \_\_\_\_\_ Returning Student \_\_\_\_\_

Student Name \_\_\_\_\_  
First Middle Last

Mailing Address \_\_\_\_\_  
Street City State Zip Code

Main Phone Number \_\_\_\_\_ Optional - A Copy of SS Card to WCS \_\_\_\_\_

Gender at Birth: M \_\_\_\_\_, F \_\_\_\_\_

Race/Ethnicity (please check one): Hispanic/Latino \_\_\_\_\_, American Indian/Alaska Native \_\_\_\_\_,  
Asian \_\_\_\_\_, Black or African American \_\_\_\_\_, Native Hawaiian/Pacific Islander \_\_\_\_\_, White \_\_\_\_\_

## EMERGENCY CONTACTS

Parent/Guardian 1 \_\_\_\_\_ Relationship \_\_\_\_\_

Address (if different from above) \_\_\_\_\_  
Street City State Zip Code

Parent/Guardian 1 Email \_\_\_\_\_ Parent Cell Phone \_\_\_\_\_

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

Parent/Guardian 2 \_\_\_\_\_ Relationship \_\_\_\_\_

Address (if different from above) \_\_\_\_\_  
Street City State Zip Code

Parent/Guardian 2 Email \_\_\_\_\_ Parent Cell Phone \_\_\_\_\_

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

Child lives with (check all that apply) Both Parents \_\_\_\_\_, Mother \_\_\_\_\_, Father \_\_\_\_\_, Grandparents \_\_\_\_\_, Grandmother \_\_\_\_\_,  
Grandfather \_\_\_\_\_, Stepfather \_\_\_\_\_, Stepmother \_\_\_\_\_, Other \_\_\_\_\_

SIBLING(S) - Please list all siblings if they are enrolled in WCS preschool through high school; please provide information.

Name \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_

Name/location of child care/school previously attended, if applicable \_\_\_\_\_

Has this student ever been dismissed from/not allowed to return to any school facility? Yes \_\_\_\_\_, No \_\_\_\_\_

If yes, please explain \_\_\_\_\_

Please describe any concerns regarding speech, language, social, emotional, or development you have about your child \_\_\_\_\_

Please note any allergies, prescription medications, serious conditions, or restricting physical conditions the school should be aware of: \_\_\_\_\_

Westwood Christian School utilizes a variety of "media outlets" (Facebook, website, Internet, photography, video recording, live streaming, etc) to promote our school and students. Your signature in the space provided below signifies you do NOT want your child appearing on the outlets used by WCS, knowing this may limit the opportunities for your child to fully participate in school activities.

**I DO NOT give permission to promote my child** on media outlets. X \_\_\_\_\_

Please **initial then sign**: X \_\_\_\_\_ In case of an emergency and I cannot be reached, I give Westwood Christian School permission to have my child transported to the local emergency department at HCA Florida Suwannee Emergency, 1100 SW 11th Street, Live Oak, Florida.

Parent/guardian signature: X \_\_\_\_\_

The following individuals **have** permission to pick up my child(ren) from Westwood Christian School:

NAME	RELATIONSHIP	PHONE NUMBER 1	PHONE NUMBER 2

Are there any legal or court/custody orders concerning your child? **Circle One:**    Yes    No  
If yes, please provide WCS with a copy of the court order.

Is there anyone who **CANNOT** pick up your child? If so, please list below.

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

(An additional sheet may be used for additional comments.)

\*This application must be completed before it can be processed. An interview with parents and any student, new to WCS, will be required before an acceptance decision is made. Westwood Christian School does not discriminate on the basis of race, color, religion, gender, age or national/ethnic origin. The Bible, God's Holy Word, provides the foundation of our school beliefs. I pledge to pay my financial obligation(s) to the school in a timely manner and support the disciplinary, academic and attendance standards set by WCS. I understand my child may be withdrawn for violation of any of these standards. I will not tolerate dishonor to the Godhead, the Word of God or disrespect to any personnel at WCS. I understand this application does not constitute a contract for enrollment until acceptance by school administration is granted.

Parent/guardian signature: \_\_\_\_\_

**For office use only:**            Birth Certificate\_\_\_\_, Award Letter\_\_\_\_, Physical Exam\_\_\_\_, Immunization Record\_\_\_\_, SS Card/copy\_\_\_\_

Date Office Received: \_\_\_\_\_