

CHILD'S RECORD

- o INDICATE "N/A" IF THE INFORMATION IS NOT APPLICABLE.
- o THE COMPLETED FORM MUST BE KEPT IN THE CHILD'S RECORD AND THE FIRST PAGE UPDATED ANNUALLY.
- o THE INFORMATION IN THIS FORM IS REQUIRED BY FAMILY DAY HOME STANDARD 22 VAC 40-111-60.

Child's Full Name	Nickname	Sex	Birth date
Street Address	City	State	Zip
			First Day of Attendance
			Last Day of Attendance
If Child Attends School, Give Name of School			Grade
EMERGENCY INFORMATION			
Allergies and intolerance to food, medications, or other substances. Actions to take in emergency situation.			
Chronic Physical Problems/Diseases; Pertinent Development Information; Special Accommodations Needed; Special Instructions to Provider			
Father's Full Name	Phone	Employer	
Father's Employer's Address (Street Address)			Father's Work Phone
Father's Home Address (Street Address) (enter "Same" if address is the same as the child's)			
Mother's Full Name	Phone	Employer	
Mother's Employer's Address (Street Address)			Mother's Work Phone
Mother's Home Address (Street Address) (enter "Same" if address is the same as the child's)			
Child's Physician	Office Address (Street Address)		Phone
	City	State	Zip
Name of Child's Medical Insurance			Policy Number
Name of Emergency Contact if Parent(s) Cannot Be Reached	Street Address		Phone
	City	State Zip	
Name of Emergency Contact if Parent(s) Cannot Be Reached	Street Address		Phone
	City	State Zip	
Person(s) Authorized to Pick Up Child (Appropriate custodial paperwork (custody order or other court order) shall be attached if a parent is not allowed to pick up the child)			
Parent Signature _____			Date _____ (Valid for One Year)
1st yr. review _____			
Parent Signature _____			Date _____
2nd yr. review _____			
Parent Signature _____			Date _____
3rd yr. review _____			
Parent Signature _____			Date _____

CHILD'S RECORD

PROOF OF AGE AND IDENTITY (must be obtained from parent within 7 business days of child's first day of attendance)			
Names & Locations (City and State) of Previous Child Day Care Programs & Schools Attended			
Place of Birth	Birth Date	Birth Certificate Number	Date Issued
Proof of Age Other Than Birth Certificate*		Date Documentation Viewed	Person Viewing Documentation
NOTIFICATION OF LOCAL LAW ENFORCEMENT AGENCY (if parent does not provide proof of child's age and identity within 7 business days of child's first day of attendance)			
Date of Notification		Name of Agency Notified	Name of Individual Notified

*Proof of age and identity may be verified by viewing one of the following: certified birth certificate; birth registration card; notification of birth, i.e., hospital, physician, or midwife record; passport; copy of the placement agreement or other proof of the child's identity from a child placing agency; original or copy of a record or report card from a public school in Virginia; signed statement on letterhead stationery from a public school principal or other designated official that assures the child is or was enrolled in the school; or child identification card issued by the Virginia Department of Motor Vehicles.

EMERGENCY MEDICAL AUTHORIZATION	
<p>I authorize _____ to obtain immediate care and consent to emergency medical procedures upon, the hospitalization of, the performance of necessary diagnostic tests upon, the use of surgery on, and/or the administration of drugs to _____ if an emergency occurs and I cannot be located immediately.</p> <p style="text-align: center;">Name of Licensed Provider Name of Child</p> <p>It is also understood that this agreement covers only those situations which are true emergencies and only when I cannot be reached. Otherwise I expect to be notified immediately.</p> <p>_____</p> <p style="text-align: center;">Signature of Parent Date</p> <p>The child's Emergency Information and the Emergency Medical Authorization must be made available to a physician, hospital, or emergency responders in the event of a child's illness or injury.</p>	

ADDITIONAL DOCUMENTS REQUIRED FOR CHILD'S RECORD

- ___ Immunization and Physical Examination Record Form MCH213 F (signed by physician, physician's designee, or health official)
- ___ Information for Parents (signed by parent)
- ___ Policy for the Administration of Medications (signed by parent)
- ___ Liability Insurance Declaration (signed by parent)
- ___ Provisions of the Home's Emergency Preparedness and Response Plan (signed by parent)

As Applicable:

- ___ General Permission for Regularly Scheduled Trips (signed by parent)
- ___ Special Field Trip Permission (signed by parent)
- ___ Medication Consent (signed by parent) ***Valid for 10 days unless also signed by physician**
- ___ Permission to Participate in Swimming or Wading Activities (signed by parent) ***Valid for one year**
- ___ Injury Record(s)

If Child with Special Needs is in Care:

- ___ Staffing Recommendation for a Child with Special Needs (signed by parent, provider, and Licensing representative)
- ___ Individual Health Care/Special Needs (signed by licensed health care professional)

Wise County Christian School

ENROLLMENT AGREEMENT

So that each parent and student understands school policies, we ask that you read the following information and sign this form indicating your agreement and understanding of the policies set forth.

1. Students are to show due respect in relations to the faculty and in speaking to faculty members. The first rule of conduct should at all times be consideration of others.
2. The use of profanity, tobacco, alcoholic beverages, illegal or unauthorized drugs on campus or off campus at any time of the year, are serious violations of the standards of Wise County Christian School. See Discipline Policy.
3. Students are not allowed to leave the school grounds during the school hours without permission from parents and proper school authorities.
4. The school is not responsible for the loss of personal property whether the loss occurs by theft, fire, or any other cause.
5. Wise County Christian School reserves the right of dismissal of any student who persistently and willfully neglects his academic work, exercises poor citizenship, reflects adversely on the Christian principles of the school or generally fails to cooperate with instructors or administration.
6. Attire and appearance appropriate to the occasion is expected of all students at all times and students are expected to adhere to guidelines as described in the student handbook.
7. Many individuals have, through their prayers and gifts, made this campus and program possible. Students should consider it a privilege to attend Wise County Christian School and therefore do all in their power to keep the building attractive and make the utmost use of all facilities. Any student known to deface or destroy school property will be assessed the full cost of repairs and be subject to possible disciplinary action including dismissal.
8. Wise County Christian School admits students of any race, color, national and ethnic origin to all rights, privileges, programs, and activities generally accorded or made available to students at the school. Nor does it discriminate in the administration of its educational policies, admission policies, scholarships, athletic, and other school administrative programs.
9. A student handbook will be furnished to each student so they will be knowledgeable of general regulations.
10. I authorize the Wise County Christian School to take my child on approved school field trips. Field trips are listed on the monthly school calendar. As parents, we sincerely pledge our loyalty to the aims and ideals of the school.
11. As parents, we hereby invest authority in the faculty and administration concerning the discipline of our child as necessary. We further agree that we will support the faculty and administration in discipline at home as needed.
12. As parents, we agree, in accordance with the principle of Matthew 18:15-17, to bring any and all questions and criticisms to the person most directly involved. If we have a question about a specific classroom action or procedure, then we will contact the appropriate teacher. If a satisfactory conclusion is not reached, then we will contact the administrator.
13. It is understood that all students are accepted on a trial basis for the first grading period before grade placement becomes final. As parents, we agree to be in regular attendance at scheduled PTF meetings.

I understand that in signing this Enrollment Agreement, I am agreeing to accept and abide by the rules and philosophy of the Wise County Christian School.

Parent's Signature

Student's Signature

STATEMENT OF FAITH

The basis of faith of this organization is as follows:

- A. There is one God eternally existing in three persons--the Father, the Son, and the Holy Spirit. (Matthew 28:19)
- B. The Bible is the Word of God, verbally inspired; infallible and inerrant in all that it says. (II Tim. 3:16; I Thes. 2:13)
- C. The Lord Jesus Christ is fully God (John 1:1); fully man (John 1:14); born of a virgin (Matthew 1:23); lived a sinless life (Hebrews 4:15); performed miracles (John 4:29); shed His blood and died a substitution death (Hebrews 10:10, 12, 19); arose bodily from the dead (I Cor. 15:12-20); ascended to and sits in glory at the Father's right hand (Hebrews 1:3); and is to return for His own (John 14:3).
- D. Man is by nature and practice a sinner; separated from God and can become God's child only by faith in the Lord Jesus Christ and His work of redemption on Calvary. (Jeremiah 17:9; Romans 3:23; Ephesians 2:8,9; and Romans 10:9,10).
- E. Those who are born into God's family have eternal life and those who are not remain in spiritual death and will be separated from God forever in Hell. (John 3:18, 36; and Matthew 25:46)
- F. The Holy Spirit lives in the believer and enables him to walk in purity of life and submission to the will of God. (Ephesians 1:13, 14; and Galatians 4:22, 23)
- G. All believers are united together by the Holy Spirit in the body of Christ for the purpose of causing the growth of the body and building itself up in love. (I Cor. 12:13; Ephesians 4:16)
- H. The triune God created from nothing all that is in the span of six days. (Genesis 1)
- I. The ministry of the local church is God's established instrument for carrying out the Great Commission. The body of Christ, the Church, is composed of all born again believers who have by faith accepted Christ as Lord.
- J. In regards to human Sexuality

Whereas, Wise county Christian School is committed to preserve Scriptural morals in the face of outside societal influences seeking to degrade the Biblical family, pervert the moral values of our nation, and intimidate God's people from speaking God's truth in love, we adopt the following into our statement of Faith:

- 1.) We believe that God has commanded that no intimate sexual activity be engaged in outside of a marriage between one naturally-born man and one naturally-born woman. We believe that any form of sexual immorality; including homosexuality, lesbianism, bisexuality, incest, fornication, adultery, and pornography are sinful perversions of God's gift of sex. We believe that God disapproves of and forbids any attempt to alter one's gender by surgery or appearance. (Gen. 2:24; Gen. 19:5, 13; Gen. 26:8-9; Lev. 18:1-30; Rom. 1: 26-29; 1 Cor. 5:1; 6:9; 1 Thess. 4:1-8; Heb. 13:4)
- 2.) We believe that the only Scriptural marriage is the joining of one naturally-born man and one naturally-born woman for life. (Gen. 2:24; Rom. 7:2; 1 Cor. 7:10; Eph. 5:22-23)

Since we are an inter-denominational body, this statement of faith constitutes the boundaries wherein we may be dogmatic.

WCCS BIBLICAL MORALITY POLICY STATEMENT

WCCS' biblical role is to work in conjunction with the home to mold students to be Christ like. Of necessity, this involves the school's understanding and belief of what qualifies or characteristics exemplify a Christ like life. The school reserves the right, within its sole discretion, to refuse admission of an applicant or to discontinue enrollment of a student if the atmosphere within a particular home or the activities of the student are counter to or are in opposition to the biblical lifestyle the school teaches, is out of harmony with the Statement of Faith, the spirit, or the policies of the school on or off school property. Readmission considerations following dismissal will be determined on a case-by-case basis. This includes, but not necessarily limited to, participating in, supporting, or condoning sexual immorality, homosexual activity, or bisexual activity, promoting such practice, or being unable to support the moral principles of the school. (Leviticus 20:13 and Romans 1:27)

I have read and am in agreement with the Wise County Christian School's biblical morality policy, Statement of Faith and student handbook. I agree to abide by all rules and regulation set forth there in.

(parent signature)

Date

(student signature in grades 6-12)

Date

This form must be signed and returned to school

**WISE COUNTY CHRISTIAN SCHOOL BOARD OF DIRECTORS
CONSENT AND RELEASE FORM FOR MEDIA INTERVIEWS
PHOTOGRAPHY, VIDEO PRODUCTION AND DISTRIBUTION**

I, the undersigned parent or guardian hereby give my consent to the Wise County Christian School Board of Directors and its member school and their agents and any news organization authorized by them to conduct interviews, record, take photos, film or videotape of myself or my Child(ren).

Names: _____

I give consent for these interviews, photos or video tapings to appear on national and/or local media, including radio, television, publications, newspapers, and the internet.

I also agree that I and/or my child shall have no legal or economic right, title, or interest in the photos, videotapes, film, publications or interviews content, nor any intellectual property right in these matters, nor may I bring any claim or cause of action for damages or injuries against the Wise County Christian School Board of Directors resulting from the gathering or dissemination of these photos, videotapes, film, publications, including interview content.

I understand I and my child will not receive any monetary compensation from the Wise County Christian School Board of Directors, nor from media organizations from distribution of these media. I understand that this consent will remain in effect until revoked by me, in writing.

___ I have read and understand this Consent and Release from, and agree to the releases contained herein:

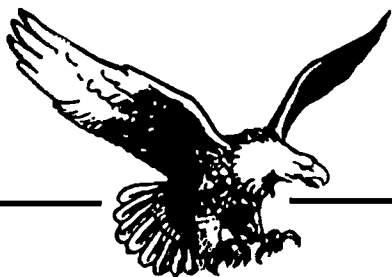
___ I do not consent to the above.

Date: _____

Parent or Guardian

(Print Name) _____

Phone No. _____



Wise County Christian School

"Academic Excellence in a Christian Environment"

P. O. BOX 3297 • WISE, VIRGINIA 24293
PHONE (276) 328-3297 • FAX (276) 328-3248

TO:

SCHOOL

ADDRESS

CITY STATE ZIP

Dear Principal:

The following student(s) has enrolled at Wise County Christian School:

STUDENT'S NAME

STUDENT'S NAME

GRADE

GRADE

DATE OF BIRTH

DATE OF BIRTH

Please forward a complete transcription of his/her records to my attention to facilitate proper academic placement. Please include: grades from course work, standardized test scores, health records, attendance records and all other pertinent data in his/her cumulative file.

Your cooperation in this endeavor is truly appreciated.

Sincerely,

Wise County Christian School

PARENT'S SIGNATURE

DATE

Train up a child in the way he should go Proverbs 22:6