

Culpeper Christian School

810 Old Rixeyville Rd Ph: 540-825-4208
Culpeper, VA 22701 fax: 540-829-0910

Email: Office@CulpeperChristianSchool.com
www.CulpeperChristianSchool.com

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

Dear Parents and Friends,

Thank you for your interest in Culpeper Christian School. It is difficult to put into a few words how meaningful we believe an education at Culpeper Christian can be – it literally changes lives!

As Christian educators we have the wonderful privilege of helping you as parents to address, according to Jesus, your child's deepest need – to nurture the soul! And we seek to help you do this while imparting to your child(ren) an exceptional, well-rounded, biblically-integrated, academic education with many opportunities for enriching experiences.

We hope you enjoy learning more about CCS as you peruse the enclosed materials and registration information for the upcoming school year; we are expecting it to be our best year ever, and we are excited about the possibility of having your family become a major part of it!

Open enrollment begins February 1st. If you wish to have your child considered for acceptance to CCS, please return the completed New Admission Application and application fee as soon as possible. Once these are received, the office will set up an appointment for an interview, at which time we ask you to bring the following completed and signed forms:

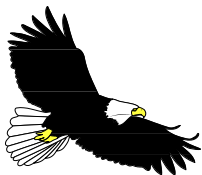
- Child Identity Form with the *original* birth certificate, which will be returned to you
- Tuition Payment Preference Form
- Parental Covenant and Agreement forms
- Medication Permission Form
- Field Trip Release Emergency Medical Form
- Medical/ Immunization Record

Also, please thoroughly read the enclosed *CCS Student Handbook*, which is also on our website, before your interview. Doing so will help you become a more involved parent who is better able to help your child(ren) get the most out of his CCS experience.

Finally, please do not hesitate to contact us with any questions you may have regarding CCS or our application process. It's going to be a great school year, and we can't wait to help you *educate for eternity!*

Serving Him together,

Michael Owings, Administrator



Culpeper Christian School

810 Rixeyville Road Culpeper, Virginia 22701
(540) 825-4208 FAX (540) 829-0910
E-mail: office@culpeperchristianschool.com

NEW ADMISSION APPLICATION

School year: _____

Grade Entering ____ (if K-4: 3 day____ or 5 day____) Date _____

Student's Name _____ (_____) _____
First Preferred Middle Last

Address _____ Zip _____

Home Telephone _____ County of Residence _____

Date of Birth _____ Circle gender: M F Social Security # _____

Father/Legal Guardian _____ Work Phone _____

Employer _____ Occupation _____

E-Mail _____ Cell Phone _____

(Used for school-to-home communication)

Mother/Legal Guardian _____ Work Phone _____

Employer _____ Occupation _____

E-Mail _____ Cell Phone _____

(Used for school-to-home communication)

Marital Status: Married Widowed Divorced Separated Remarried Single

If divorced or separated, who has legal custody of the child(ren)? _____

If divorced or separated, who has primary physical custody of the child(ren)? _____

Name, address and phone number of parent not living with child: (Father ___ Mother ___)

Name _____ Address _____

Phone () _____

Persons authorized to pick up student _____

(Students will be released to these persons only, unless prior notification is received in the school office)

Emergency numbers (If parents cannot be reached)

Emergency Contact #1 Name _____ Relationship to student _____

Phone number: Home Cell Work _____ Phone number: Home Cell Work _____

Emergency Contact #2 Name _____ Relationship to student _____

Phone number: Home Cell Work _____ Phone number: Home Cell Work _____

Church attending _____ Pastor's Name _____

Frequency of church attendance: Weekly _____ Monthly _____ Occasionally _____

Previous School _____ Address _____

Reason for transfer _____

Have you applied or will you be applying to any other school this year? _____

How did you find out about Culpeper Christian School? _____

Do you have other school age children? _____

Will your child use the extended care program? No _____ Yes _____ (Hourly _____ Unlimited _____)

Permission is given to include my child in a directory for CCS parents:

- Name
- Address *Please check the appropriate box(es), indicating the information*
- Phone *that you would like to be included in the CCS directory.*
- E-mail

- None, I would prefer not to participate in the CCS Directory

Choose option 1 **OR** 2 and sign:

- 1) I/we understand that my/our child may be photographed or videotaped by the school in the course of school activities. I/we give consent for my child to be included in promotional and advertising materials, articles in the news media, and on the CCS website.

(Parent Name) (Signature) (Date)

- 2) I/we would prefer that my/our child **not be included in the above.**

(Parent Name) (Signature) (Date)

Application Fee (Due with application)	\$150 for returning students/siblings by January 31st \$200 starting Feb 1st
--	--

Father's Signature _____ Date _____

Mother's Signature _____ Date _____

Culpeper Christian School admits students of any race, color, national and 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 and ethnic origin in administration of its educational policies, admissions policies, athletic and other school-administered programs, nor in the hiring of faculty or staff.