

The River Learning Academy Family Enrollment Form

To be completed by Parent(s)

Please fill in all the information as completely as possible. Incomplete forms will not be accepted.

PARENT INFORMATION: First Name:

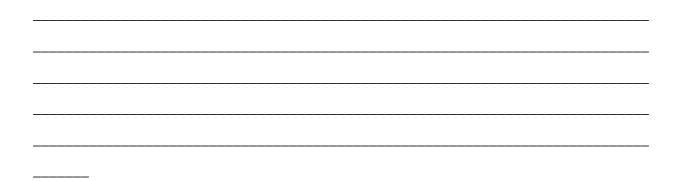
Father/Guardian Last Name:			FirstName:				
Mothe/Guardian Last Name:			First Name:				
If divorc	ed/separated,	who has legal cu	ıstody? □	Father	□Mother □J	□Widow □Widowe	
Address:						_ City:	_Zip:
Father E	mail Address:						
Mother !	Email Addres	s:					
Father C	Cell Phone:				Mother Cell I	Phone:	
		lifferent than ab				her's 	_ Zip:
How did	l you hear abo	out The River Le	earning A	Academy	y?		
		EN	IERGE I	NCY C	ONTACTS:		
Name:_			_ Relatio	onship:		Phone Number:_	
Name:_			_ Relatio	onship:		Phone Number:_	
Name:_			_ Relatio	onship:		Phone Number:_	
		ATTENDI	NG STU	J DEN T	'S INFORM	ATION:	
Name Last			First			Middle	
Name pi	referred (nick	name, abbreviati	on, etc.)				
Student	phone:			Stud	ent email:		
Age	Sex	Birth Date	/	/	Birthplace _		
Last Sch	ool Attended				T.	ast Grade Completed	1

School Address			
City	State	Zip	Phone
Name Last		_ First	Middle
Name preferred (nickna	me, abbreviatio	on, etc.)	
Student phone:		S	cudent email:
Age Sex	Birth Date _	//	Birthplace
Last School Attended			Last Grade Completed
School Address			
			Phone
Name Last		_ First	Middle
Name preferred (nickna	me, abbreviatio	on, etc.)	
Student phone:		S	cudent email:
Age Sex	Birth Date _	//	Birthplace
Last School Attended			Last Grade Completed
School Address			
City	State	Zip	Phone
Name Last		_ First	Middle
Name preferred (nickna	me, abbreviatio	on, etc.)	
Student phone:		S	tudent email:
Age Sex	Birth Date _	//	Birthplace
Last School Attended			Last Grade Completed
School Address			
City	State	Zip	Phone

Name Last		First	Middle	
Name preferred (nickname	ne, abbreviation	n, etc.)		
Student phone:		Stu	dent email:	
Age Sex	_Birth Date _	//	Birthplace	
Last School Attended			Last Grade Completed	
School Address				
City	State	Zip	Phone	
Name Last		First	Middle	
Name preferred (nicknar	ne, abbreviation	n, etc.)		
Student phone:		Stu	dent email:	
Age Sex	_Birth Date _	//	Birthplace	
Last School Attended			Last Grade Completed	
School Address				
City	State	Zip	Phone	
If yes, explain:	peen suspended	, dismissed o	TC INFORMATION: r refused admission to another school?	
— Please indicate if any of t □Behavioral and/or disci	he following ap	ply to the pr	evious school, to the home, or to other is ted on probation	

				
_				
When calling your previous schoo	ol, what comment could we anticipat	re?		
□Good Student □Discipline □Pr	oblem □Learning Disabilities			
Is there anything you feel we shou	ld know about your student(s) in or	der to teac	h effectively	?
Explain:				
			, , , , , , , , , , , , , , , , , , , ,	
_		_		
Does the applicant have any ment or progress that should be known:	tal, emotional or physical handicaps t	that may a	ffect his/her	activities
_				
Please indicate the academic level	•	0 1	4	D
Student:		Good	Average	Poor
Student:		Good	Average	Poor
Student:		Good	Average	Poor
Student:	circle one Excellent	Good	Average	Poor
Student:	circle one Excellent	Good	Average	Poor
FA	AMILY FAITH INFORMATION	!:		
Church Attending		Past	or	
Address	dressPhone			
PLEASE CHECK THE APPRO				
Father, born-again Christian (Joh	n 3:3-5) □Yes □ No Family Practice	e – Daily I	Devotions? □	Yes □ No
· ·	hn 3:3-5) □Yes □ No Family Practio	-	Devotions?	∃Yes □ N
Has the student(s) ever made a pro	ofession of faith in Christ? □Yes □ N	Jo		

If yes, please nar	ne student(s)		
Church Attenda	ance:		
	Regular (3-4 Weeks a Month)	Occasional (Once Per Month)	Seldom
Student(s)	Regular	Occasional	Seldom
Father	Regular	Occasional	Seldom
· · · · · · · · · · · · · · · · · · ·			Seldom
We request that	t you consider the following items and	respond to them for our mutual und	derstanding:
A. How do you	provide spiritual training for children	in the home?	
,			
B. What goals do	o you have in mind for the training and	d development of your child(ren) as	individuals?
C What are you	ur rossons for wanting to openly your d	aildran in The Diver Learning Acade	
C. What are you	ır reasons for wanting to enroll your cl	mater in The River Learning Acade	111y:



PARTICIPATION REQUIREMENTS & STATEMENT FOR PARENTS OF CO-OP:

We(I) agree that we(I) will, to the very best of my abilities, fulfill the responsibilities to which we(I) have agreed.

We(I) understand that volunteer hours are 12 hours a week. There may be a \$10 an hour missed additional charge if you do not pay the drop off rate.

We(I) understand that tuition is due the 1st of every month, but there is grace to pay until the 15th of the month. A late fee of \$25 will be added to all tuition paid after the 18th of the month.

We(I) understand the following policy for missed tuition payment(s):

Missed Tuition payment plan policy.

1st month missed: Administrators will check in with families/send payment reminder letter.

2nd month missed: Yourself and administrators will discuss how to help and choose a 4mo or 6mo repayment contract.

3rd month missed: Yourself and administrators will meet to reason out if RLA is meeting the needs and circumstances of your family.

We(I) will endeavor to serve the families of the Co-op in a way that will bring glory to God knowing that it is a ministry.

We(I) understand that as a group of believers we are to "do nothing from rivalry or conceit, but in humility count others more significant than ourselves. Letting each of us look not only to our own interests, but also to the interests of others." (Philippians 2:3)

We(I) promise to keep my commitments unless catastrophic circumstances prevent me from doing so. If we(I) must leave the co-op we(I) will submit a 30 day notice as well as fulfill my commitments until the end of our(my) 30 days.

We(I) promise to work to resolve any conflict in which we(I) am a participant and/or witness with humility and love for my brother and/or sister in Christ using Biblical Guidelines. (Matt. 18:15) If we(I) have a question or disagree about a decision that has been made by co-op leadership we(I) know that we(I) am to address it with them. we(I) know we(I) will be heard, but we(I) cannot always know everything that must be considered when making a decision and understand their decision is final.

We(I) also promise not to abuse any authority and power over decision making that we(I) have been given but will be careful to consider all persons that will be affected by my decisions and will do what is best for the group as a whole and not what is best for any one individual to the detriment of others, with the Bible as my ultimate standard.

Because this is an educational environment for our children we endeavor to maintain Christian Principles. As a co-op we value parent-led education. There will always be a parent as a co-teacher if a non-parent teacher is brought in.

Children are expected to conduct themselves both academically and behaviorally in a manner appropriate to the class. If expectations are not being met the parent(s) will be notified immediately to handle the situation.

It is the parents' responsibility to discipline, not the teachers.

We (I) give my consent and permission for any photos or video recordings of myself or other members of my family including my children while at co-op to be used without further consent or remuneration in promotional materials for the co-op including but not limited to the group website and brochure.

Failure to follow any of the above mentioned guidelines may result in revocation of membership privileges.

The River Learning Academy reserves the right to select students on the basis of academic performance and personal qualifications. RLA does not discriminate on the basis of race, color, nationality, or ethnic origin in administration of its educational policies, admission policies, and athletic or other co-op administered programs. Attendance is a privilege, so that to ensure that this works for all there a

3 month trial period where either party is able to end participation. This privilege may be forfeited by
those who do not conform to the standards and regulations of the co-op. RLA strives to accommodate
all students of all abilities. RLA is a homeschool co-op, so ultimately families are responsible for their
child's education and accommodations.

Father's Signature	Date
Mother's Signature	Date