



2019-2020 Registration Form

Date: _____

STUDENT INFORMATION

Student's Name: _____

M / F

Date of Birth: _____

Grade 2019/20: _____

Student's Email Address for teacher/staff correspondence: *(if student does not have an email account, use parent email)*

Student's Cell Phone #: _____

PARENT INFORMATION

Parents/Guardians: _____

Address: _____

Mom's cell phone: _____ Dad's cell phone: _____

Primary Parent Email for teacher/staff correspondence: _____

Please use an email address that is checked consistently throughout the week during the school year.

Please choose the program(s) you wish to enroll your student in:

Tuesday thru Thursday Core Program (required): _____

Mindset Monday (optional): _____

Friday Focus (optional): _____

How did you hear about us: _____

To complete enrollment, the following must be received:

1. Registration Packet
2. Declaration of Intent to Homeschool form (1 per family) *
3. Signed Financial Contract
4. Registration fee (non-refundable must be received before student registration is processed)

Make checks payable to: Compass Prep Academy, P. O. Box 691, Holly Springs, GA 30142 (Cash, check or credit cards accepted)

*** Required for all new and returning students (K-12)**

Georgia state law requires all home school students, including students attending Compass Prep Academy to submit this form at the beginning of every school year.

- Go to www.GaDOE.org
- Click "Parents/Home Schooling" (found halfway down on the far left of the page)
- Click on Link for "Submit an Online Declaration of Intent" and Type information
- Click submit
- PRINT form and include with this Registration Form

**** All students will be on a six week probationary period. Compass Prep Academy, may in its absolute discretion, dismiss the student for any reason without notice or cause.

MEDICAL INFORMATION

Does student have any **ALLERGIES**? Yes / No

If yes, please list allergies:

Is student taking any **MEDICATIONS**? Yes / No If yes, please list medications:

Does student carry an **EPI-PEN**? Yes / No

MEDICAL INSURANCE INFORMATION

Name of Insurance Company: _____

Policy Number: _____ Phone Number: _____

Name of Primary Policy Holder: _____

Relationship to Student: _____

Student Name: _____

EMERGENCY CONTACT INFORMATION (if parent/guardian cannot be reached)

Name: _____ Relationship: _____

Cell Phone: _____ Alternate day time phone: _____

PERMISSION/MEDICAL CONSENT/STATE EXEMPTION FORMS

(To be completed by parent or legal guardian of child)

As a parent or legal guardian of :

Please PRINT student's full name

I hereby give permission for my child(ren) to attend, participate and/or be transported to any activity organized by and/or for Compass Prep, Inc. This includes activities on Life Bible Church ("Church") property as well as activities that are not on said "Church" property.

I understand my signature below is my permission for my child(ren) to be transported from and to the "Church", or other location that shall be our meeting place. Also, my signature below proves that I acknowledge and accept the risk of personal injury associated with participation in the activities, including but not limited to transportation. I accept personal financial responsibility for any bodily injury sustained by my child(ren) during the activities, including but not limited to transportation.

Further, I promise to hold harmless Compass Prep, Inc. and its representatives, including but not limited to its directors, teachers, and members. I also understand and agree that Life Bible Church and its representatives have no responsibility for any of the activities and no liability, whatsoever.

I authorize any representative of Compass Prep, Inc., including but not limited to my child(ren)'s teacher(s), to have medical treatment administered to my child(ren) as they deem necessary and I guarantee payment for all such care. I understand that reasonable efforts will be made to contact me as soon as possible, if my child(ren) require(s) medical treatment. To the best of my knowledge, I have listed all of my child(ren)'s medical allergies, medications being taken, medical problems, and other pertinent information. I will update this listing as needed, to keep this information current. My child(ren) has/have my permission to participate in all Compass Prep, Inc. activities.

I give my permission for my child(ren)'s picture and name to be used on Compass Prep Inc.'s website. I release and hold Compass Prep, Inc. and its directors, teachers, members, and webmaster harmless.

Bright from the Start

Compass Prep Academy's program **is not** licensed and **is not** required to be licensed by the state of Georgia.

Father's Signature: _____ Printed Name: _____
Date: _____

Mother's Signature: _____ Printed Name: _____
Date: _____

REFERENCES

Family friend: _____

Phone #: _____

Address:

How long has family friend known student? _____

Former teacher: _____ Grade or Class: _____

School: _____ School phone #: _____

School address:

Community leader: (pastor, employer, scout troop leader, coach, etc):

How long has this leader known student? _____ Phone #: _____

In what capacity did leader serve?

NAME OF CHURCH OR FELLOWSHIP GROUP:

Please note: The philosophy of Compass Prep Academy is based on a Christian foundation and a Biblical worldview. We do not represent a particular branch of the Christian faith or a denomination. Acceptance of a student is not based on their church affiliation or lack thereof. However, parents and students need to know that students will be taught by instructors who hold to historic Christian doctrines.

PREVIOUS SCHOOL BACKGROUND (elementary, middle, high school)

Grade level
Phone number

School

Contact name

Are there any special educational circumstances we should be aware of? If so, please briefly describe the issues/diagnoses:

Parents: Please give your reasons (as the parent) for wanting your student/family to attend Compass Prep Academy. *(Use back if more space is needed)*

Middle and High school students:

Please give your reasons (as the student) for wanting to attend Compass Prep Academy.

There are no right or wrong answers so feel free to answer honestly 😊

(Use back if more space is needed)