



LOVING SAVIOR LUTHERAN SCHOOL

14816 PEYTON DRIVE ~ CHINO HILLS, CA 91709

Phone (909) 597-2948 ~ (909) 393-4659 Fax

www.lovingsavior.org email: school@lovingsavior.org

REGISTRATION PACKET FOR THE 2010 – 2011 SCHOOL YEAR

Dear Prospective Parents:

Enrollment at Loving Savior Lutheran School is open to all children. Loving Savior Lutheran School exists for the purpose of assisting parents in meeting the responsibilities that God has placed upon them. It is our goal to work together with parents in bringing up their children to know about the God who loves them through His Son, Jesus. Students enrolling in Kindergarten must be 5 years old on or before September 15th of the current year.

THE FIRST DAY OF SCHOOL FOR THE 2010-11 SCHOOL YEAR IS MONDAY, AUG. 30TH

REGISTRATION FEE: (NON-REFUNDABLE)

\$450.00 per student for grades K-8th (Registration includes school yearbook and spirit shirt)

TESTING FEE: For New Students (NON-REFUNDABLE)

\$25.00 per incoming new student due at the time of testing.

ATHLETIC FEE: For Grades 5-8 only

\$25.00 to participate in one or more sports throughout the year.

Applicable fees must accompany your registration packet, as well as all paperwork.

TUITION:

<u>NUMBER OF STUDENTS:</u>	<u>ALL STUDENTS:</u>	<u>ACTIVE MEMBERS OF L.S. CHURCH:</u>
1 CHILD	\$ 5,100	\$ 4,700
2 CHILDREN	\$ 9,900	\$ 9,400
3 CHILDREN	\$14,600	\$14,100

Active members of Loving Savior Lutheran Church will attend church at least twice monthly and participate actively in a church ministry. Both the non-member and active member discounts illustrated above are based on the number of children enrolled in the elementary school. **Siblings still in preschool do not qualify for an elementary school multi-children discount. Enrollment will be accepted in the following order: (1) members of Loving Savior Lutheran Church, (2) students of employees of L.S. Church or School, (3) current students with siblings enrolled in our school, (4) current students by years enrolled at L.S., and (5) new students.**

A 5% tuition discount, for non-members and active members, will be given on tuition paid in full by September 3rd, 2010 (no exceptions). Tuition and full time day care are annual fees for actual number of school days. For your convenience only, it has been divided into ten equal payments beginning on August 1st, 2010 and ending May 1st, 2011. Automatic Debit/Credit is available. (Information in school office.)

A **LATE CHARGE** of \$25.00 will be added after the 5th of the current month. If **TUITION** is not received by the 15th of the month, your child may be suspended until payment is received. If we **DO NOT** receive payment by the end of the month, your child may be removed from the class roster. AN **INSUFFICIENT FUND CHARGE** of \$25.00 will be added for any check returned unpaid. After the 2nd insufficient check, payment will be on a cash only basis.

SCHOOL HOURS:

8:15 A.M. – 2:45 P.M. Grades Kdg. – 1st
8:15 A.M. – 3:00 P.M. Grades 2nd – 5th
7:45 A.M. – 2:30 P.M. Grades 6th – 8th

EXTENDED DAY CARE:

Full time Extended Day Care fees are \$175 per month per child.

HOURS: 6:00 a.m. – 6:00 p.m.

YEARLY: \$1,750 (10 PAYMENTS OF \$175 per month Aug. 1st, 2010-May 1st, 2011)

Drop in rate - \$8.00 per hour or any portion thereof. Drop in day care is billed once a month and is separate from tuition and full time day care.

USE OF DAY CARE DOES NOT INCLUDE CHRISTMAS OR EASTER VACATION

Loving Savior of the Hills Lutheran School admits students of any race, color, or national or ethnic origin to all the rights, privileges, programs, and activities generally accorded to or made available to students at school. We do not discriminate on the basis of race.

STEPS IN REGISTRATION

STEP 1 Fully complete the enclosed Registration Packet by March 5th, 2010 and return it to the School Office. This is for our returning students. Open Enrollment for the public starts March 8th, 2010. Attach the following to the contract:

***A check for registration fee in the amount of \$450.00 (NON-REFUNDABLE)**

***A copy of your child's birth certificate (for new or kindergarten students)**

***A copy of your child's immunization records (for new and kindergarten students). If you have misplaced your card, your doctor will have copies.)**

***A completed Health Form (for new and 1st grade students) turned in no later than the first day of school.**

***A copy of the most recent report card and SAT scores (for new students)**

STEP 2 For all kindergarten and new students, your child's current teacher must complete the recommendation form (attached). After the teacher completes the form, he/she must mail it to our school office. We will not continue the registration process for your student without a recommendation form.

STEP 3 When we receive your completed registration packet, your registration fee, your child's birth certificate, immunization record (*all kindergarteners and new students only*), and recommendation form (*all kindergarten and new students*), we will then schedule your child to be tested. Our current students do not need testing. Testing for incoming Kindergarten will begin in April, 2010. Test results are evaluated by the staff. You will then be notified of the results and your child's enrollment status.

STEP 4 Upon acceptance into Loving Savior Lutheran School your registration fee check will be processed.

How did you learn about our school? _____

Last school attended and address: _____

EMERGENCY INFORMATION

Father: Home () _____ Work () _____ Cell () _____

Mother: Home () _____ Work () _____ Cell () _____

ADDITIONAL PERSON(S) TO CALL

Additional persons who may be called in an emergency and are authorized to take child:

NAME	ADDRESS	PHONE	RELATIONSHIP

HEALTH INFORMATION

Unusual health conditions/allergies: _____

Problems with speech, hearing, vision: _____

Additional remarks: _____

Allergic to bee stings or insect bites? Yes No Unknown

Allergic to any medications? _____

Any medications taken: _____

Will pay physician fees not covered by school insurance: Yes No

If physician can not be reached, call any Hospital or physician: Yes No Remarks: _____

Permission to take field trips? Yes No Permission to play sports? Yes No

PHYSICIAN:

Name: _____

Address: _____

Telephone: _____

Medical Plan: _____ Group No.: _____

RELIGION INFORMATION

Member of Loving Savior Church: Yes No

Please mark your Religious Affiliation:

Lutheran _____ Catholic _____ Baptist _____ Methodist _____ Presbyterian _____ Orthodox _____
7th Day Adventist _____ Non-Denomination _____ (this includes Calvary Chapel, Inland Hills, Community Churches)
No Church Affiliation _____ Other Church Affiliation _____

Does family attend worship services regularly: Yes No Where: _____

Child baptized: Yes No Where: _____ Date: _____

LOVING SAVIOR LUTHERAN SCHOOL

PARENTS' CONTRACT FOR ADMISSION OF STUDENT

Student _____
(Full Name) (Birthdate) (Entering Grade)

Names of Parents (or Guardians) with whom student lives:

Father: _____
(Name/Address)

Mother: _____
(Name/Address)

NOTE: A contract must be completed and signed for each student enrolled and returned to the school, ALONG WITH REGISTRATION FEE IN THE AMOUNT OF \$450.00. This is Non- Refundable.

BY RESOLUTION OF THE BOARD OF EDUCATION OF LOVING SAVIOR OF THE HILLS LUTHERAN CHURCH, THE FOLLOWING STATEMENTS ARE DESIGNED TO BE THE CONDITIONS FOR ADMISSION:

By my signature on this document, I acknowledge I am the parent or legal guardian of the following student for whom I have requested admission into Loving Savior Lutheran School.

In consideration of such admission, I agree to the conditions governing admission and attendance at the school, as stated below:

1. I agree to pay tuition charges and fees established by the school administration for the current year, as stated in the Registration, Tuition and Day Care Agreement in this contract.
2. I agree to make tuition and fee payments to Loving Savior Lutheran School on or before the scheduled dates as set forth in the Registration, Tuition and Day Care Agreement. In the event that I fail to make such tuition and fee payments as agreed, I acknowledge that the school will enforce the following penalty:

IF TUITION IS NOT RECEIVED BY THE 15TH OF THE CURRENT MONTH, YOUR CHILD MAY BE SUSPENDED UNTIL PAYMENT IS RECEIVED. IF WE DO NOT RECEIVE PAYMENT BY THE END OF THE MONTH, YOUR CHILD MAY BE REMOVED FROM THE CLASS ROSTER.

3. I agree to the following conditions of attendance:
 - a) Each parent must acquaint himself/herself with school regulations/policies and observe them. From time to time the school administration may issue bulletins to students and/or parents covering new regulations/policies or the amendment of existing regulations/policies adopted by the Loving Savior Board of Education. I understand that breaches of school regulations by students are subject to disciplinary action by the school and that serious violations of the regulations/policies or other serious misconduct can result in expulsion from School.
 - b) Each student is required to participate in all school functions, including those that are worship related, when their whole class or whole school is involved (i.e.: Choir singing in Sunday morning Worship Service, Chapel, Children's Christmas Programs, other services, etc.) Students may be excused from these worship experiences only if they are in conflict with scheduled activities at their own church.
 - c) The parents of students who are new to our school and church community are encouraged to attend Adult Information classes conducted by the Pastor of Loving Savior Lutheran Church. The Adult information classes are open to all members of our school community, and are for the purpose of acquainting those in attendance with the Ministry of Loving Savior Lutheran School and the scriptural/theological positions of the Lutheran Church, Missouri Synod.
 - d) To meet the Parent Points Program by choosing either 20 points or \$200.

REGISTRATION, TUITION AND DAY CARE AGREEMENT

REGISTRATION FEE: (NON-REFUNDABLE)

\$450.00 per student.

TESTING FEE: (NON-REFUNDABLE)

\$25.00 per new student K-8th grade.

ATHLETIC FEE: For Grades 5-8 only

\$25.00 to participate in one or more sports through the year.

TUITION:

NUMBER OF STUDENTS: ALL STUDENTS: ACTIVE MEMBERS OF L.S. CHURCH

1 CHILD	\$ 5,100	\$ 4,700
2 CHILDREN	\$ 9,900	\$ 9,400
3 CHILDREN	\$14,600	\$14,100

Tuition is an annual fee for actual number of school days. For your convenience only, it will be divided into ten equal payments, beginning on August 1st, 2010 and ending on May 1st, 2011

SCHOOL HOURS: **8:15 A.M. – 2:45 P.M. Grades Kdg. and 1st**
 8:15 A.M. – 3:00 P.M. Grades 2 – 5
 7:45 A.M. – 2:30 P.M. Grades 6 - 8

Tuition and full time day care are due and payable on the first (1st) of each month and considered late after the fifth (5th) of the month. **A late charge of \$25.00 will be charged after the 5th of the current month. A \$25.00 fee will be charged on all returned checks.**

EXTENDED DAY CARE – K & 1 students who remain on campus after 3:00 p.m., 2nd – 5th grade students who remain on campus after 3:15 p.m., and 6th – 8th grade students who remain on campus after 2:45 p.m., will be taken to and signed into Day Care where the hourly rate of \$8.00 will be charged for each hour or portion thereof unless the student is enrolled in full-time day care.

FULL TIME DAY CARE: YEARLY - \$1,750.00 (per student, per year)
 10 PAYMENTS - \$ 175.00 (per student, per month)

HOURS: 6:00 A.M. – 6:00 P.M.

CHILDREN PICKED UP AFTER 6:00 P.M. WILL BE CHARGED \$1 PER MINUTE, WITH A MINIMUM CHARGE OF \$5.00, due and payable in cash at the time of pick up. After three (3) late pick-ups per month, the child may be put on probation pending a review of the circumstances. Abuse of this policy may lead to the expulsion of the child from our day care program.

USE OF DAY CARE DOES NOT INCLUDE CHRISTMAS OR EASTER VACATION.

SUMMARY – I agree to pay the registration, tuition, fees and charges scheduled herein on or before the due date and to abide by the terms and conditions of the Parents' Contract for Admission of Student into which this statement is hereby incorporated. I UNDERSTAND THAT I MUST GIVE TWO WEEKS WRITTEN NOTICE WHEN WITHDRAWING MY CHILD FROM LOVING SAVIOR LUTHERAN SCHOOL FOR ANY REASON.

Mother _____

Date _____

Father _____

Date _____

LOVING SAVIOR LUTHERAN SCHOOL

**EXTENDED SCHOOL AGE DAY CARE
REGISTRATION FORM**

(A form must be completed for every registered student)

Will student need full time daycare (\$1,750 year/\$175 per month): Yes No

Student's Name: _____
(Grade)

Father: _____
(Name/Address) (Home Phone) (Cell Phone)

Mother: _____
(Name/Address) (Home Phone) (Cell Phone)

Father's Employment: _____
(Company Name) (Work Phone)

Mother's Employment: _____
(Company Name) (Work Phone)

Family Doctor: _____
(Name) (Phone)

Other person to call in an emergency: _____
(Name) (Phone)

List any health problems or allergies: _____

Name of person(s), other than parents, who may pick up your child:

Name: _____ Phone: _____

Name: _____ Phone: _____

Name: _____ Phone: _____

Name: _____ Phone: _____

I agree to abide by all the policies of Loving Savior Lutheran School Extended Day Care and I agree to pay all fees by the due date(s) each month. FAILURE TO PAY FEES IN A TIMELY MANNER WILL RESULT IN YOUR STUDENT BEING EXCLUDED FROM DAY CARE UNTIL PAYMENT IS RECEIVED.

Children picked up after 6:00 p.m. will be charged \$1 per minute, minimum charge of \$5, due and payable in cash at the time of pick up.

Signature: _____ Date: _____

Signature: _____ Date: _____

Email address: _____

Dear Parents:

Because Loving Savior Lutheran School is located in an earthquake prone area, we want to inform you of procedures to follow in the event of an earthquake during a school day.

1. No student will be dismissed from school unless a parent or individual designated by a parent comes for him/her.
2. No child will be allowed to leave with another person, even a relative or babysitter, unless the school has written permission to the effect, or that particular person is listed on the child's emergency form in the school files. (Be sure the form is current).
3. All parents, or designated parties, who come for students, must sign them out either at the temporary **COMMAND POST** or at the office.
4. The school is prepared to care for your child/children in time of catastrophe. If you are unable to reach the school, the staff will care for your child. The school will be in communication with local emergency services.
5. In the event of an emergency:
 - a. Please do not call the school. All lines must be open for emergency calls.
 - b. Following a major earthquake, do not immediately drive to the school. Streets and access may be cluttered with debris. Street entrances to the school must remain clear for emergency vehicles.
 - c. Tune your radio to emergency station **KFI - 640 AM** for information.
6. Each classroom will be assembled on the field and will be identified by a sign with a room number. If a parent does not know the room number, please check at the **COMMAND POST**.
7. Those students not picked up will be kept at school.

The staff of Loving Savior Lutheran School will do everything possible to keep your child safe until you can pick him/her up. Hopefully, the school preparedness will never have to be used. But we hope to be prepared if any emergency arises. Earthquake supplies will be provided through your registration fee. They will be stored in the large tank storage located on the playground.

Sincerely,

Loving Savior Lutheran School Staff

(Parent Signature)

Please return this form to the school office with the rest of this packet.

LOVING SAVIOR LUTHERAN SCHOOL

Parent Points Program

The main purpose for the Parent Points program is parental involvement. Additionally, operating costs can be kept down if parents have special skills or services to offer for particular services that may be needed.

Each family is required to complete 20 points per year. Each point is equivalent to one hour of volunteer work. The deadline to complete points is May 1st of each year. Deficiencies in points that are not completed will be charged accordingly at a rate of \$10 per point.

The following are a few examples of ways in which to earn points:

- Parents and Teachers of Loving Savior (PTLS) Officers: President, Vice President, Secretary, Treasurer, Points Coordinator, Room Parent Coordinator, Sports Committee, Fundraising.
- Room parents: 20 points to be divided amongst room parents equally for each class if the parent completes the year as an involved room parent.
- Chaperones for field trips
- Drivers for athletic events
- Work parties, special holiday events
- Participation in school fundraisers
- Donations (such as copier paper, office or classroom supplies, or needed equipment)
- Special services or skills

Points are negotiable for professional services performed/donations made depending on the donation. Please ask if you have suggestions not listed.

Parent Points Agreement

I/We will complete the family goal and earn 20 parent points by May 1, 2011. Points can be earned by volunteering for various things at school (as listed above). I/We understand that incomplete points will be billed to us at \$10 a point and that it is our responsibility to complete and turn in the Parent Points Slips, located in the school office.

(Parent Signature)

(Date)

PLEASE RETURN THIS WITH YOUR CHILD'S REGISTRATION PACKET

GOLD SPIRIT SHIRT SIZE FORM

Every registered student will be given 1 (one) gold spirit shirt. Please complete the information below, and return it with your registration forms. Shirts will be passed out the first week of school. These shirts are mandatory for all field trips.

Student's Name: _____

Grade: _____

Select Only 1 Shirt Size

Children's Sizes:

S	<input type="checkbox"/>
M	<input type="checkbox"/>
L	<input type="checkbox"/>

Adult Sizes:

S	<input type="checkbox"/>
M	<input type="checkbox"/>
L	<input type="checkbox"/>
XL	<input type="checkbox"/>

After the first couple of weeks of school, we will be ordering additional gold and navy blue spirit shirts for which we will be taking orders.

Look for the flyer to go home in September.



Loving Savior of the Hills Lutheran School

14816 Peyton Drive – Chino Hills, CA 91709

(909) 597-2948 * Fax (909) 393-4659

Kindergarten Student Recommendation Form

E-Mail: school@lovingsavior.org * www.lovingsavior.org

Dear Parent:

Please complete the student information below and request the remainder from your student's preschool teacher.

NAME OF STUDENT: _____ Phone: _____

Address: _____ City/State: _____

Current Teacher: _____

NAME OF PARENT: _____ SIGNATURE _____

Dear Teacher:

The above student has applied for admission to Loving Savior Lutheran School, Chino Hills. Please have this form completed by the person (teacher) who best knows the student. Please return the completed form to Loving Savior Lutheran School at the above address. Do not return the form to the applicant or applicant's parent.

Please check the appropriate response to each question	ALWAYS	USUALLY	SELDOM
1. Student is able to care for his/her toilet and dressing needs			
2. Student works to the best of his/her ability.			
3. Student should have an attention span of approximately 15 minutes.			
4. Student demonstrates appropriate conduct at school.			
5. Student is able to do academic work at a reasonable pace.			
6. Student can communicate with teachers and other classmates in a complete sentence.			
7. Student knows the magic words (please, thank you, etc.) and uses good manners.			

8. Does the family meet their financial responsibilities? YES _____ NO _____ N/A _____

Recommendation: please check one of the below responses:

_____ I recommend highly _____ I recommend _____ I recommend with reservation _____ I do not recommend

If you checked "I recommend with reservation" or "I do not recommend", please explain: _____

Signature

Title

School

Date

Preschool Director's Signature

Agree _____ Do Not Agree _____



Loving Savior of the Hills Lutheran School

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Student Recommendation Form Grades 1-8

E-Mail: school@lovingsavior.org * www.lovingsavior.org

Dear Parent:

Please complete the student information below and request the remainder from your student's current principal.

NAME OF STUDENT: _____ Phone: _____

Address: _____ City/State: _____

Current Teacher: _____

NAME OF PARENT: _____ SIGNATURE: _____

The above student has applied for admission to Loving Savior Lutheran School, Chino Hills. Please have this form completed by the person (teacher) who best knows the student. Please return the completed form to Loving Savior Lutheran School at the above address. Do not return the form to the applicant or applicant's parent.

Please check the appropriate response to each question	ALWAYS	USUALLY	SELDOM
1. Student is prepared for class.			
2. Student works to the best of his/her ability.			
3. Student completes assignments carefully.			
4. Student demonstrates appropriate conduct at school.			
5. Student demonstrates good moral and personal qualities.			

6. Does the student have any known and diagnosed learning differences? YES ___ NO ___

7. (If YES, please state the nature of the learning difference and what may be done to accommodate the student.) _____

8. Please list areas of co-curricular interests: _____

9. Does the family meet their financial responsibilities? YES ___ NO ___ N/A ___

Recommendation - Please check one of the below responses:

___ I recommend highly ___ I recommend ___ I recommend with reservation ___ I do not recommend

If you checked "I recommend with reservation" or "I do not recommend", please explain: _____

Teacher's Signature _____ Title _____ School _____ Date _____

Principal's Signature _____ Agree ___ Do Not Agree ___