



Alternative Program REGISTRATION PACKAGE 2012 - 2013

For entrance into Meadowlark Christian School

The **Community Christian Education Program (CCEP)** at Meadowlark Christian School (MCS) is open to students of all backgrounds. The CCEP is an Alternative Program of Edmonton Public Schools (EPS) offered in partnership with the MCS Foundation (Foundation).

The Foundation charges Program Fees to cover the cost of the CCEP. See the MCS Alternative Program Fees Schedule for details.

New families to MCS must have an interview with the Principal before admission can be granted. New students in grades 7 to 9 must also attend the interview to determine the student's willingness to cooperate with the policies and goals of the school. New students in kindergarten to grade 6 need not attend the interview.

Returning Students to MCS	Transfer Students from another EPS	New Students to the EPS district
<p>Enclosed in this package:</p> <ul style="list-style-type: none"> • Alternative Program Registration Form • Alternative Program Fees Schedule • Method of Payment for Alternative Program Fees 	<p>Enclosed in this package:</p> <ul style="list-style-type: none"> • Alternative Program Registration Form • Alternative Program Fees Schedule • Method of Payment for Alternative Program Fees • CCEP Document*(new families only) • School Handbook*(new families only) • Partnership Agreement* (new families only) 	<p>Enclosed in this package:</p> <ul style="list-style-type: none"> • Alternative Program Registration Form • Alternative Program Fees Schedule • Method of Payment for Alternative Program Fees • EPS Student Registration Form • CCEP Document*(new families only) • School Handbook*(new families only) • Partnership Agreement* (new families only)
<p>Please return to MCS:</p> <ul style="list-style-type: none"> • Alternative Program Registration Form • Alternative Program Fees Schedule • Method of Payment for Alternative Program Fees • EPS Passport 	<p>Please return to MCS:</p> <ul style="list-style-type: none"> • Alternative Program Registration Form • Alternative Program Fees Schedule • Method of Payment for Alternative Program Fees • EPS Passport 	<p>Please return to MCS:</p> <ul style="list-style-type: none"> • Alternative Program Registration Form • Alternative Program Fees Schedule • Method of Payment for Alternative Program Fees • EPS Student Registration Form • Copy of latest Progress Report
<p><i>*If you currently have children attending MCS and wish to enroll another child, you WILL NOT receive the CCEP document, School Handbook or Partnership Agreement in your registration package as your family has previously acknowledged these documents.</i></p>		
<p><i>Additional copies of forms, CCEP document, School Handbook and Partnership Agreement are available at the school office and on the web site at www.k-9christian.com.</i></p>		

Enrollment Procedure

1. Please read the enclosed materials.
2. Submit the necessary registration materials (as indicated above) with the appropriate registration fee to the school office. Registration applications received **on or before April 13, 2012** have priority. After **April 13th**, all registrations are subject to space in planned classes.
3. **NEW FAMILIES ONLY:** Contact the school office to arrange an interview with our Principal. During the interview, you will have an opportunity to ask any questions you have about education at Meadowlark Christian School. The Foundation's Executive Director will also attend this interview to answer questions. Then you will be asked to sign the Partnership Agreement.
4. You will receive written confirmation of admission.



Alternative Program REGISTRATION FORM

DATE _____
For School Year _____

These forms must be **completed in full**, including payment information, before it will be accepted. **The MCS Foundation registration fee of \$75.00** for each student, to a maximum of \$150 per family, **must** accompany this application and is not refundable. Please make cheques payable to "MCS Foundation".

PARENT(S)/GUARDIAN

Choose one: New family to MCS Existing MCS family

PARENT(S)/GUARDIAN(S)

Last Name(s): _____

First Name(s): _____

Address: _____

City: _____ PC: _____

Telephone: _____

Email: _____

STUDENT'S LEGAL NAME:

N = New Student T = Transfer Student R = Returning Student GR* = Entering Grade

N T R	
1 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	_____
	Student's First & Last Name GR*
Birthdate DD/MM/YY	_____
	Previous School
2 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	_____
	Student's First & Last Name GR*
Birthdate DD/MM/YY	_____
	Previous School
3 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	_____
	Student's First & Last Name GR*
Birthdate DD/MM/YY	_____
	Previous School
4 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	_____
	Student's First & Last Name GR*
Birthdate DD/MM/YY	_____
	Previous School
5 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	_____
	Student's First & Last Name GR*
Birthdate DD/MM/YY	_____
	Previous School

KINDERGARTEN CLASS:

Our kindergarten class is offered on **Tuesdays/Thursdays (alternating Fridays)**.

RELIGIOUS INFORMATION Entries in this section are optional.

Church you attend: _____

Address: _____

Pastor: _____

Phone: _____

Father: Christian? Yes No **Mother:** Christian? Yes No

FOR NEW FAMILIES ONLY:

I hereby certify that I have read the Community Christian Education Program document and the School Handbook. I support the Mission Statement and acknowledge my child(ren) will be educated in accordance to both. I understand I will also be required to sign a Partnership Agreement with Meadowlark Christian School before admission is granted.

Signature of Parent/Guardian Date

Signature of Parent/Guardian Date

For existing MCS families, the CCEP document, School Handbook, Mission Statement and Partnership Agreement are available at the school office or on the web site at www.k-9christian.com for your review.

The personal information collected on this form is for MCS Foundation purposes only. All information will be treated confidentially.

Please make cheques payable to "MCS Foundation".



*Bright futures
begin here*



Alternative Program FEES SCHEDULE

PLEASE READ AND RETAIN THIS SHEET. The MCS Foundation has a graduated fee schedule with reduced costs per student for larger families. It is important for the Foundation to remain above reproach in financial matters; therefore, parents are reminded it is absolutely necessary for fee payments to remain up-to-date.

FEE SCHEDULE: *See payment options below*

	Total Annual	10 monthly payments	Lump Sum (inc. 3% discount*)
Registration Fees	\$75/child		max \$150/family
Kindergarten	\$567	\$57.00	\$550.00
Grades 1-9			
1 student	\$1,452	\$145.00	\$1408.40
2 student	\$2,173	\$217.00	\$2107.80
3 students <i>or more</i>	\$2,565	\$256.00	\$2488.05

PAYMENT OPTIONS:

To reduce administrative costs, monthly fees must be paid by automatic withdrawal.

- *1. **Lump sum payment** by cheque or money order of Alternative Program Fees will receive a **3% discount**.
- 2. Pre-authorized **monthly** withdrawals on the 1st** or 15th day of the month with first payment in September 2012 and last payment in June 2013.
- 3. Pre-authorized **twice monthly** withdrawals on the 1st and 15th day of the month with first payment in September 2012** and last payment in June 2013.

**September 1st payment may be delayed for up to two weeks.

Any dishonored cheque or payment will incur a service charge of \$25.00.

TERMS & CONDITIONS OF PRE-AUTHORIZATION

I/We will notify MCS Foundation in writing of any changes in the account information or termination of this authorization at least ten (10) days prior to the next payment date.

I/We understand the termination of this authorization does not affect my/our obligation to pay for goods or services contracted with MCS Foundation.

My/Our financial institution will treat each debit as if I/we had personally issued a written direction authorizing MCS Foundation to debit the amount(s) specified to my/our account and need not verify that payments are drawn in accordance with this authorization.

I/We understand that any debits charged to my/our account will be re-imbursed if:

- This debit was not drawn in accordance with this authorization;
- This authorization has been terminated; or
- The debit was posted to the wrong account due to invalid/incorrect account information supplied by MCS Foundation

by giving notice in writing to my/our branch of account within ninety (90) days of the debit to my/our account.

I/We acknowledge that delivery of this authorization to MCS Foundation constitutes delivery to my financial institution.

I/We warrant that all persons whose signatures are required to sign on this account have signed this authorization.

You will receive a letter from the MCS Foundation confirming your child(ren)'s acceptance and method of payment.

PLEASE NOTE...

1. Registration fees **MUST be submitted** at the time of registration.
2. Make cheques payable to "MCS Foundation".
3. The "MCS Foundation Method of Payment for Alternative Program Fees" **must be completed in its entirety** (ie: a payment choice must be selected and a void cheque). **Failure to do so will delay your child's registration until all the necessary information has been submitted.**



Method of Payment for ALTERNATIVE PROGRAM FEES

Please fill in and return this sheet to Meadowlark Christian School with your child(ren)'s registration form.

Please select a method of payment for the school year.

Make cheques payable to "MCS Foundation"

- Lump sum payment of annual fees by last business day of September.
- Pre-Authorized Withdrawal (PAW) by MCS Foundation (Please complete the PAW form below.)

As part of the MCS mission, Fee Assistance is available. Please see the school office for forms.

Alternative Program payment fees for:

Student Name: _____

Student Name: _____

Student Name: _____

Student Name: _____

Student Name: _____

Pre-Authorized Withdrawal (PAW) Form

Please return this sheet to Meadowlark Christian School with one of your **personal cheques unsigned and marked VOID** (for verification purposes). Please do not write on the micro encoding at the bottom of the cheque.

I/We (Name) _____

Type of Service: Personal Business

Address _____

City _____ Prov. _____ Postal Code _____

I/We Authorize MCS Foundation
9825 - 158 Street, Edmonton, AB T5P 2X4
Tel: 780-483-6476 Fax: 780-487-8992
to debit my/our account for school fee payments.

This authority is to remain in effect until MCS Foundation has received written notification from me/us of its change or termination. This notification must be received at least ten (10) business days before the next debit is scheduled. I/We may obtain a sample cancellation form, or more information on my/our right to cancel PAW Agreement at my/our financial institution or by visiting www.cdnpay.ca

I/we have certain recourse rights if any debit does not comply with this agreement. For example, I/we have the right to receive reimbursement for any debit that is not authorized or is not consistent with this PAW agreement. To obtain a form for a Reimbursement Claim, or for more information on my/our recourse rights, I/we may contact my/our financial institution or visit www.cdnpay.ca.

Account _____

Financial Institution _____

Branch _____

Transit # _____

(first 5 numbers at bottom of cheque)

CHOOSE ONE ONLY

Payable: ONCE a month in the amount of \$ _____

- On the first day of every month beginning September 1*, 2012 with last payment on June 1, 2013

or

- On the fifteenth day of every month beginning September 15, 2012 with last payment on June 15, 2013

or

Payable: TWICE a month in the amount of \$ _____ and \$ _____

- On the first day of the month, beginning September 1*, 2012 and 2nd payment on the fifteenth day of every month. Last payment will be on June 15, 2013

***September 1st payment may be delayed for up to two weeks.**

•••

I/We have read and understood the terms of this authorization and acknowledge receipt of a copy thereof.

See **Alternative Program Fees -**
Terms and Conditions of Pre-Authorization.

Any dishonored cheque or payment will incur a service charge of \$25.00.

Signature of Parent/Guardian _____ Date _____

Signature of Parent/Guardian _____ Date _____

For joint accounts, all depositors must sign if more than one signature is required on cheques issued against the account.