



# LIBERTY CHRISTIAN ACADEMY

*A Ministry of Stoney Point Baptist Church*

6548 Rockfish Road

Fayetteville, NC 28306

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www.lcknights.com

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## APPLICATION FOR ENROLLMENT

Date of Application: \_\_\_\_\_

Grade Entering: \_\_\_\_\_

Child's Name: \_\_\_\_\_

First

Middle

Last

Address: \_\_\_\_\_

Gender: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

### Parent/Guardian:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Home # \_\_\_\_\_ Mobile # \_\_\_\_\_ Work # \_\_\_\_\_

Email address: \_\_\_\_\_ Financial Responsibility: Whole  Half  None

Home address: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Home # \_\_\_\_\_ Mobile # \_\_\_\_\_ Work # \_\_\_\_\_

Email address: \_\_\_\_\_ Financial Responsibility: Whole  Half  None

Home address: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Home # \_\_\_\_\_ Mobile # \_\_\_\_\_ Work # \_\_\_\_\_

Email address: \_\_\_\_\_ Financial Responsibility: Whole  Half  None

Home address: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Home # \_\_\_\_\_ Mobile # \_\_\_\_\_ Work # \_\_\_\_\_

Email address: \_\_\_\_\_ Financial Responsibility: Whole  Half  None

Home address: \_\_\_\_\_

Does your child have any special needs or allergies? \_\_\_\_\_ If so, please explain:

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Has your child repeated any grade? \_\_\_\_\_ If so, what grade? \_\_\_\_\_

Please list the name, address, and phone number of the school your child last attended:

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Has your child been diagnosed with any behavioral or learning disabilities (such as ADD, ADHD, etc.) that would interfere with his/her ability to learn? \_\_\_\_\_ If so, please explain:

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Has your child been expelled or dismissed from school in the last 2 years? \_\_\_\_\_ If so, please explain:

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List the name(s) of other family members (include relationship) who have attended or who are currently attending Liberty Christian Academy:

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How did you hear about Liberty Christian Academy?

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Does your child regularly attend church? \_\_\_\_\_ If so, please give the name of the church:

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Is there any additional information which would be helpful to your child's teacher? \_\_\_\_\_

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Please tell us why you have chosen to place your child at Liberty Christian Academy:

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Below are the basic principles upon which Liberty Christian Academy stands. A parent who desires their child to attend LCA must support these basic foundations. A parent or guardian must initial that they will support these principles prior to their child being enrolled at LCA.

**Biblical Doctrines**

See “Statement of Faith” in the LCA Handbook. \_\_\_\_\_

**Issue of Morality and Conduct**

We believe in the Sanctity of Life for the unborn, the elderly, and the infirmed; moreover, we believe that marriage is a sacred institution ordained by God between one man and one woman. \_\_\_\_\_

I will support all the policies contained in the LCA Handbook. I understand that the recurrent or unrepentant immoral behavior, on the part of the student or parent, will be grounds for dismissal from Liberty Christian Academy. \_\_\_\_\_

**Areas of Parental Responsibility**

I will participate in my child’s education through the teaching and training of Christian principles and by being a role model through consistent Christian living. I will support the school through prayer. \_\_\_\_\_

I will participate in my child’s education by assisting him/her with homework, projects, papers, etc. \_\_\_\_\_

I will support the school financially by paying my school bil, the Administrative Fee/Capital Improvement Fee of \$350 per student per year, and all other fees on time. \_\_\_\_\_

Due to contractual obligations with teachers, I agree to pay a \$500 withdrawal fee for my child if I withdraw him/her from June 1st to May 1st, unless withdrawal is due to military orders or by request of the LCA administration. \_\_\_\_\_

I understand that my child’s attendance at Liberty Christian Academy is a privilege and not a right. If at any time his/her conduct, academic progress, or cooperation with school authorities is not in keeping with the school’s requirements, the school reserves the right to withdraw my child from Liberty Christian Academy.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## STATEMENT OF UNDERSTANDING AND WAIVER OF LIABILITY

I recognize that attendance at Liberty Christian Academy is a privilege and not a right. Parents are expected to cooperate with and support the Academy and its teachers in the education and discipline of their child(ren) both in the classroom and during other school related activities. I believe that discipline is necessary for the welfare of each student, as well as for the entire Academy. I give permission for my child's teacher and/or other agent of the Academy to to make and enforce classroom regulations in a manner consistent with Christian principles. Students shall forfeit the privilege of attending the Academy if they do not conform to the standards and the way of life at the Academy. The Academy reserves the right to withdraw a student at any time that the student, in the opinion of and sole discretion of the Academy, does not conform to the spirit of the Academy.

I further understand that Liberty Christian Academy policy prohibits refunds of registration fees, testing fees, book fees, or the first tuition payment.

In the event that a Liberty Christian Academy photographer or videographer takes a picture of my child, either individually or in a group, I give my permission for my child's picture to be used in future brochures, websites, videos, DVDs, or other publications of Liberty Christian Academy.

I give permission for my child to take part in all activities, including without limitation, transportation to and from school (including times prior to pick up and following discharge from the bus), bus trips, sports activities on the premises of Liberty Christian Academy, and Academy sponsored trips away from the Academy premises. I indemnify and save Liberty Christian Academy, its employees and agents harmless from and against any claims, demands, causes of actions, liability, medical payments, costs and attorneys' fees resulting from or arising out of the participation by my child in the above-mentioned activities. I understand that Liberty Christian Academy does not provide medical insurance coverage for my child and that I will be solely and fully responsible for any medical expenses or other liabilities incurred.

I understand that should my marital status change, it is my responsibility to have a corrected Statement of Understanding and Waiver of Liability signed and updated and delivered to Liberty Christian Academy.

This Statement of Understanding and Waiver of Liability shall remain in effect for as long as my child listed (or others to be enrolled) attends Liberty Christian Academy, whether it be in the kindergarten, elementary, junior-senior high, or summer school. Any reference herein to "child" shall include and refer to all of the children listed on this application, or others to be enrolled in the future.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_