# Welcome to Priest Lake Academy 2019-2020

#### **Return to PLA**

- Family Registration Application
  - Financial Commitment Form
- PLA Driver Form (High School Only)
  - Waiver
  - Hold Harmless Agreement
    - Signature Page
    - Photo Release
    - Family Interview

**Contact Information:** 

#### priest lake a cade my 1@gmail.com

615-956-2752

### **Family Registration**

Mother's First & Last Nar	her's First & Last Name Father's		First & Last Name		Does Child(ren) live with both parents? □Yes □No
Street Address, City, Zip				Home Phone	<del>.</del>
Mother's Cell Phone	Father's Cell I	Phone	Email Add	lress (contact	for PLA)
Emergency Contact Nam	e Emerge	ncy Contact	Phone	Emerg. Cont Child	act Relationship with
Unauthorized Pick Up (A	nyone NOT allov	wed to pick	up your chi	ld.)	
Authorized Pick Up ( Who	o can pick up yo	our child? P	lease inclu	de a copy of a	photo I.D.)
Church Name	AC	Past	or's Name		Church Phone
Umbrella School	AG				•
SENIORS ONLY: Name as it should appear on their Diploma Certificate					
SENIORS ONLY: To order gowns we need to know how tall your Senior is in feet and inches					
	Pa	rticipating s	tudents:		
Nam	e(s)			Grad	е

Does your child have any allergies? □Yes □No	What type of allergy & w	hat are the reactions?



#### **Financial Commitment**

**Check Register** 

Please complete the register below for checks given at registration:



Check No.	Check Dated	Written To	Class Name	Amount
		ALEGT !	110.	
		OKIFALF	HAR	
		ACARE	MY	
			VIII	

Check Number	Check Dated	Written To	Class Name	Amount
		ALEGT	14.	
		OKIFOL	-HKF	
		ACARE	MV	
		ALAUL	IVII	
		ce, building, administratio BLE in part or in whole and		
I		, ha	ve read this policy and agre	e to comply
with it.			, i i, i i ii,	F ,
Date Please rea	ad: This	form is applicable to you if yo	ur student will be drivina the	emselves or
others to	PLA.	0 PLA Driver & Leaving	_	

Driver's Name	Driver's Cell Phone Number
1.	
2.	
3.	

- □ I give the above driver(s) permission to leave school grounds during school hours
- □ I do **NOT** give the above driver(s) permission to leave school grounds.

Place a check mark in the box during which the High School Student is **allowed to leave school grounds**.

	Hour 1 8:00-9:00	Hour 2 9:05-10:05	Hour 3 10:10-11:10	Lunch 11:15-11:45	Hour 4 11:50- 12:50	Hour 5 12:55-1:55	Hour 6 2:00-3:00
Child 1			FCT				
Child 2			MILE				
Child 3							

Please list the students that are allowed to ride with the above driver(s). Only one passenger at a time is allowed in a vehicle. The passenger's parent's signature is also required on this form. (Note: Student drivers are permitted to drive siblings to PLA and to leave with them after dismissal. Student drivers are not allowed to take non-driving siblings to lunch.)

Passenger Name	Passengers Parent's Signature
A	
Daniel de Circulations	
Parent's Signature	

# PARTICIPANT / GUARDIAN WAIVER / INDEMNITY AGREEMENT / LIABILITY RELEASE FORM (Release of all claims.)

Portion and	Priest Lake Academy (PLA)
Participant	Smyrna Church of Christ
Participant	- 112 Division Street
Participant	Smyrna, Tennessee 37167
In consideration of your accepting our child or children for paractivities and Sports, I hereby, for myself, my heirs, executors, a and all rights and claims for damages that I may have against the Academy, and its agents, employees, representatives, successuffered by myself or my child or children that rise out of the sports sponsored by the above named organization.	and administrators, waive and release any ne above named organization, Priest Lake sors and assigns for any and all injuries
I warrant that I have the right to authorize the foregoing and d organization harmless of and from any and all liability of whater from such participation.	
I hereby release, forever discharge and agree to hold harmless the directors thereof from any liability, claims or demands for pe property damage and expenses, of any nature whatsoever which the child participant that occur while said child is participating in	rsonal injury, sickness or death, as well as h may be incurred by the undersigned and
Furthermore, we (I) hereby assume all risk of personal injury, si result of participation in recreation and work activities involved in	
The undersigned further agree to hold harmless and indemnify agents, for any liability sustained by said church as the result of said participant, including expenses incurred thereto.	
We (I) are the legal guardian(s) of this participant, and grant our Priest Lake Academy, and give our (my) permission to take so hereby authorize medical treatment including but not limitation to and assume responsibility of all medical bills, if any.	aid participant to a doctor or hospital and
For the consideration stated above, I further agree that in the claims against the above named organization for damages a activities or sports, I will personally indemnify, defend, and hold employees, representatives, successors, and assigns against thereby, including attorney's fees.	rising out of the above named program, harmless the organization and its agents,
I have read and understand the Agreement and have willingly pmy acceptance of all the conditions contained herein.	placed my signature below as evidence of
Signatures:	
Participant:	Date:
Participant:	Date:
Participant:	Date:
Guardian:	Date:

#### **Priest Lake Academy Homeschool Christian Tutorial (PLA)**

#### RELEASE AND HOLD HARMLESS AGREEMENT

Ι,	, understand that my involvement with Priest Lake
Academy Homeschool Chi	ristian Tutorial (PLA) is voluntary. My child
has certa	in medical conditions that I have identified and am aware of. I have explained
such conditions to the rep	resentative board members and tutors involved with his/her education during
his/her time at PLA. I realize	ze and acknowledge that my leaving him at PLA without my personal supervision
carries with it the potential	for certain risks, some of which may not be reasonably foreseeable.
I further acknowle	edge that these risks could cause my child or others around him/her, harm,
including, but not limited to	, bodily injury, damage to property, emotional distress, or death.
	STEPT 1 1 A
• .	ticipant in leaving my child at PLA unsupervised during his/her weekly Friday
classes.	AUIZA
<b>5</b>	
, , , ,	reement, I agree to release, indemnify, and hold harmless PLA as well as all of
	resentatives, successors, etc. from all losses, claims, theft, demands, liabilities,
•	ses, known or unknown, arising out of my voluntary decision to drop off and leave
my child to attend classes	at PLA without my personal supervision.
	ACADEMY
Signed:	ACADLIVII
Printed Name	
Signature	
Dates:	

# Signature Page Please initial by each bullet statement.

•	I have read and understand the PLA Affirmation of Faith. I understand that all classes, activities, policies, and procedures will rest on the foundation of this statement.
•	I understand and agree that once registration at PLA is completed, maintenance and administration fees, supply fees, and tuition are NON-REFUNDABLE in part or in whole and are NON-TRANSFERABLE.
•	As a student of PLA I have read, understand, and agree to honor the PLA Student Commitment. I understand that any disciplinary action taken is at the discretion of the teacher and the PLA Team and in extreme cases could result in expulsion without refund of tuition. I also understand that re-enrollment will be denied if this covenant is not fulfilled.
•	As a parent of a student of PLA I have read, understand, and agree to the requirements listed on the Parent/Student Commitment page. I understand that any disciplinary action taken is at the discretion of the tutor and the PLA Team and in extreme cases could result in expulsion without refund of tuition. I also understand that reenrollment will be denied if this covenant is not fulfilled.
•	I agree to fulfill the parent Friday helper commitments required by PLA. I understand that 2 commitments are required. If these commitments are not met, I will not receive a \$50 refund.  I have read and understand the Returned Check Policy.
•	I have a student who is allowed to leave semples and have completed the
•	I have a student who is allowed to leave campus and have completed the form on page 15
Please	e print your full name:
Signat	ture:
Date:	

## PHOTO RELEASE (For a child under 18 years of age, complete this section).

I,	, Parent,	/Guardian of [insert name	(s) of child/ren:
(1)			
(3)			
appropriate purposes, inc publications and websites	and consent to the use of his cluding but not limited to: stil . All said photos and/or images ent with no claim for payment and	I photography, videotape, e are and shall remain the pro	electronic and print
I do not authorize	and consent to the Photo Relea	se for my child/ren.	
Parent's Signature:	OKIESI	Date:	
Print Name:			
Parent's Signature:	5/1	Date:	
Print Name:	<u> </u>	Phone:	
	PHOTO RELE (for adults and parents		
videotape, electronic and	Academy for appropriate purpos print publications, and website est Lake Academy. I give this co	s. All said photos and/or in	to: still photography, nages are and shall
I, Priest Lake Academy.		,do not authorize to the use o	of my visual image by
Signature:		Date:	
		Phone:	

# Family Interview (New Families Only)

Please complete and Return to PLA

1. How did you hear about PLA?

2. How long have you been homeschooling? What are the names and ages of the children you homeschool?

RIEST LAKE

- 3. What is your primary reason for enrolling your child or children at PLA?
  - ACADEMY
- 4. Are you interested in being a Board member or learning more about serving with PLA?
- 5. Would you be interested in teaching?
- 6. Have you read and agree to the Affirmation of Faith?