Destiny Performing Arts Learning Academy 2022-2023 Enrollment Application 1140 Commerce Center Dr. Lancaster, CA 93534 Suite M-9 661-582-8179

Date:	Start Date:			
Student				
Last Name:	First Name:		Gra	ade Entering:
Address				
Phone	Sex D	ate of Birth	City of Birth	State of Birth
Ethnic Background:	African American_			_
	White	Native Hawaiian	Other:	
How did you learn abo	ut D.P.A.L.A?			
Siblings				
1. Last Name		First Name		Age
Grade	Sc	chool Attending		
Grade		chool Attending		
		chool Attending		
Parent/Guardian	Father's Email		Mother's Email_	
Father		First Nam		
Step Father	Address			
Guardian				
	Employer	Work Pho	one	Cell
	Employer Address _			
Mother	Last Name	First Nam	e	Phone
Step Mother				
Guardian				
	Employer	Work Pho	one	Cell
	Employer Address			
NAME A	ND ADDRESS OF PERS	SON RESPONSIBLE FOR PAYME	NT OF ACCOUNT IF DIFFE	RENT FROM ABOVE
Name		SSN#		Phone
				Thore
Address				
Student Previous School	l			
Name	Phone			
Address				

Admissions Information

- 1. Admission to D.P.A.L.A is based on the past performance of the student, standard test results, and the commitment of student and parent to school philosophy and policy.
- 2. Every student must submit the following records for admission.
 - Proof of birth
 - Current Immunization
 - Most recent report card
 - Testing Scores (if available)
 - Kindergarten and first grade students must also have a doctor's physical.

- 3. Incoming Kindergarten students must be 5 years of age by September 1, 2023.
- 4. Incoming students will have a principle's interview as well as any required testing prior to acceptance for admission.
- 5. Church affiliation is not a pre-requisite for consideration to D.P.A.L.A, however all families are encouraged to be involved in a local church of their own choosing. Students must respect the beliefs and teachings of D.C.I.
- 6. There is no refund or credit for student absence, for any reason.
- 7. Space is secured for an incoming student when the required records listed above have been submitted at registration, books, and admission fees have been paid, and when the principal has accepted the student for admission.

Financial Agreement

I understand that payments are due on the 1st of the month and will be considered late if not paid and received by the 5th of the month. A monthly late fee of \$25.00 will be assessed on any payment not received by the due date. A \$25.00 returned check fee will be charged on any returned checks. I am responsible for keeping my account current and should I fall 10 days behind, my child will be asked not to return to school until my account is made current. This document serves as a promissory note and I promise to pay all payments when they are due. If my child withdraws I am responsible for the tuition for that month or any part of the month.

Parent/Guardian Signature	
Λ	MEDICAL DISCLOSURE FORM
Child's	
Name	
o control	
Date of Birth	
Please list any allergies your child may have.	
Food:	
Other:	
Special Instructions for my child:	
Emergency contact:	
Name:	
Phone:	Phone:
Name:	
Phone:	Phone:
Parent/Guardian Signature	Date:
Dectiny Performance Arts and learning Academy	

Destiny Performance Arts and learning Academy 1140 Commerce Center Dr. Lancaster, CA 93534 Suite M-9

Terms and Conditions

The following terms and conditions of enrollment at Destiny Performing Arts & Learning Academy are part and parcel of the 2022-2023. Tuition Contract by and between Destiny Performing Arts & Learning Academy and the person (s) (herein "I" or "We") whose signature(s) appear on this page and/or the 2022-2023 Tuition Contract of the next page:

- 1) The registration fee is nonrefundable and is deemed fully earned by Destiny Performing Arts & Learning Academy upon receipt; provided however, that Destiny Performing Arts & Learning Academy shall refund the registration fee for my child if there are no openings in the child's grade level, or provide a partial refund if my child tests one or more grade levels below standard and I/we do not wish to enroll the student. I understand the administration has full authority for grade or section placement.
- 2) Each child is accepted on his or her individual merits, regardless of race, color, national origin, or ancestry.
- 3) I hereby grant permission for my child(ren) to use the play equipment and participate in all activities of the school.
- 4) I hereby grant permission for my child to be included in evaluations, photographs, sound recordings and videos connected with the school during academic studies, activities, special events, performances, and free time. These may be used in the yearbook, newsletter, publicity, and marketing efforts for the school.
- 5) I understand that Destiny Performing Arts & Learning Academy does not carry accident insurance for students. I/we, as the parent(s) or guardian(s) of our child(ren) enrolled at Destiny Performing Arts & Learning Academy do hereby authorize, in advance, a representative of Destiny Performing Arts & Learning Academy to obtain emergency medical care and give specific authorization for diagnosis or treatment for my child while he or she is under school supervision. Emergency care may include transportation, x-ray, anesthetic, medical or surgical diagnosis, treatment or hospital care rendered under the supervision of a physician or surgeon licensed under the provisions of the Medicine Practice Act. I agree to maintain medical insurance coverage for my child and accept full financial responsibility for such emergency care obtained by the Destiny Performing Arts & Learning Academy representative for my child. The Destiny Performing Arts & Learning Academy representative will not assume any financial responsibility for exercising this action. In accordance with Section 25.78 of the Civil Code of California, this authorization shall remain effective until revoked in writing and delivered to Destiny Performing Art & Learning Academy.
- 6) I hereby agree to comply with all policies and procedures of Destiny Performing Arts & Learning Academy in accordance with the acknowledgment of receiving a copy of the 2022-2023 fee schedule.
- 7) I understand Destiny Performing Arts & Learning Academy shall be entitled to dismiss or expel my child at any time with cause.
- 8) This Agreement is made by mutual consent, and I or the school may terminate this agreement at any time, with or without cause. The obligations of Destiny Performing Arts & Learning Academy shall be excused hereunder if Destiny Performing Arts & Learning Academy fails to perform its obligations hereunder because of strikes, lockouts, labor disputes, embargoes, acts of God, governmental restrictions, governmental regulations, government controls, judicial orders, enemy or hostile governmental action, civil commotion, fire or other casualty, or other causes beyond the reasonable control of Destiny Performing Arts & Learning Academy. Tuition will be prorated in accordance to the Fee Schedule.
- 9) Upon termination of this Agreement or completion of the school year, I/we shall continue to be jointly and severally liable to Destiny Performing Arts & Learning Academy for any and all financial obligations theretofore accruing under this Agreement, together with interest thereon at the maximum rate permitted by law. I understand that Destiny Performing Arts & Learning Academy will notify subsequent schools if there is an outstanding balance at the time of transfer to the new school.
- 10) In any litigation or other proceeding by which one party either seeks to enforce its rights under this Agreement or seeks a declaration of any rights or obligations under this Agreement, the prevailing party shall be awarded reasonable attorney's fees, together with any costs and expenses, to resolve the dispute and to enforce their final judgment.

Father/Guardian (Print)	
Mother/Guardian (Print)	-

Father/Guardian Signature	Date:		
Mother/Guardian Signature	Date:		
Destiny Performing Arts & Learning 1140 Commerce Center Dr., Lancast Suite M-9			
	D.P.A.L VIDEO/PHOTO		
	RELEASE F	ORM	
	g Arts and Learning Academy the irrevo- urning Academy and other websites and i se without compensation to me.		
final product. I agree that all such por	cographs and/or video recordings of my cotraits, pictures, photographs, video and a iles are and shall remain the property of t	udio recordings, and any reprodu	
and employees of the above-named en	scharge the Destiny Performing Arts and natities from any and all claims, demands, n of said photographs and/or video records.	rights, promises, damages and lia	bilities arising out of or in
document. I understand and agree that	is under eighteen (18) years old, the follo at it is binding on me, my child (named a ore and that I am the parent or guardian	bove), our heirs, assigns and perso	
Signature of Parent/Cuardian of indi	vidual Photographed and/or recorded		Date
	vidual Photographed and/or recorded		_ 300
Signature of Witness			Date

D.P.A.L.A OUTING PERMISSION FORM

Dear Parent or Guardian,

Date

Relationship to Student

Here at D.P.A.L.A we go on regular local outings. This form is a consent these trips without daily permission.	that you are allowing the D.P.A.L.A Staff to take your child(ren) along on
If and/or when there is a field trip outside of the are or to a theme park t	here will be a Trip Slip sent home with your child specifically for that event.
I, the parent/guardian of, wis	h for my son/daughter to participate in the regular local outings.
I do hereby expressly and knowingly release and discharge the D.P.A.L. any injury or harm which may result to my son/daughter in the course of	A school, its employees and agents from any and all liability arising out of of his/her participating in these regular local outings.
Signature	
Date	
Relationship to student	
I, the parent/guardian of	, wish for my son/daughter to participate in the regular local outings.
I consent to any and all emergency medical treatment, as deemed necess the above child without notice to me and without any further request fo	sary by the D.P.A.L.A school's staff or authorized agent being provided for r permission from me.
Signature	