



# Compassion Learning Institute

## Registration Form 2025-2026 School Year

### School Use Only

Date Received: \_\_\_\_\_  
Registration Fee Paid: ☐ Yes ☐ No  
Registration Status: ☐ Approved ☐ Pending ☐ Denied  
Staff Member: \_\_\_\_\_

### Student Information

Students name (first, last, middle): \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Gender: ☐ male ☐ female Grade 2025-2026 School Year: \_\_\_\_\_ Previous grade completed: \_\_\_\_\_

Student Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

ZIP: \_\_\_\_\_ Phone (Home): \_\_\_\_\_ (Cell): \_\_\_\_\_

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

### Previous School Information (if applicable).

Name Previous School: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address of Previous School: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

If you have your child's previous educational transcripts, please attach them to this form.

### Parent/Guardian Information

Father's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Occupation: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Address: \_\_\_\_\_ ☐ Same as student

Mothers Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Occupation: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Address: \_\_\_\_\_ ☐ Same as student

Do you have any legal guardian or custody arrangements? Y/N

If yes, what arrangements need to be upheld by the school staff and administration?

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Please ensure that physical proof of custody arrangements is given to the school administration in order to maintain lawful standards of practice.

Emergency Contact 1 Name: \_\_\_\_\_

Relationship: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Emergency Contact 2 Name: \_\_\_\_\_

Relationship: \_\_\_\_\_ Phone Number: \_\_\_\_\_

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### Medical Information

Does your child have any allergies (food or other) or medical conditions we should be aware of?  
(Please list any relevant information, including medications and treatment plans.)

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Is your child currently taking any medications/supplements? (List below)

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Students health care provider: \_\_\_\_\_ phone: \_\_\_\_\_

Address of provider: \_\_\_\_\_

Current Medical Insurance carrier and ID #:

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Does your child require any special accommodations or learning support? (Please provide details.)

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### Photo & Media Release

At Compassion Learning Institute, we celebrate and showcase student achievements through photos and videos in various school-related materials (e.g., newsletters, websites, social media, and yearbooks).

Please review and select your preference regarding photo and media releases.

**I give permission for my child's photo, video, and/or artwork to be used by the school for promotional purposes, media, and school publications.**

☐ Yes, I give my consent.

☐ No, I do not give my consent.

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

## Parent Agreement

By submitting this registration form, I agree to the following: ( please initial each)

1. I will be involved in my child's education by communicating with teachers and participating in school events. \_\_\_\_\_
2. I understand that my child's registration is subject to approval based on availability, and the school has the right to request additional documentation or assessments. \_\_\_\_\_
3. I agree to abide by the policies and expectations of the school as outlined in the student handbook. \_\_\_\_\_
4. I understand that tuition is due on the specified dates, and I will work with the school to ensure timely payment. \_\_\_\_\_

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

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## Tuition Information & Payment

**If you are using classwallet for your tuition, please make payments to “Compassion Learning Institute AZ.”**

**A registration fee of \$55 is charged once a year, and is separate from the tuition fee.**

Tuition will be due quarterly.

### Kindergarten

\$4,800 per year for half-day kindergarten.

Please note that an additional \$80 monthly fee will need to be paid for full day Kindergarten, and will not be covered by ESA funding.

1st-7th Grade

- \$6,400 per year for 1st-7th grade.

Please select your payment plan:

- ☐ Quarterly payments through ESA funding.
- ☐ Quarterly payments through personal funds.

**\*Please note that a completed registration form, and submitted payment does NOT guarantee your student's enrollment, and all payments are non-refundable.\***