

# Kingsway Leadership Academy

1727 Senator Carlos Truan Blvd.  
Kingsville, TX 78363  
(361) 592-5132 Fax (361) 592-6320

## Term 2025 – 2026 APPLICATION

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### CHARGES PER CHILD

REGISTRATION	\$ 150.00 (Non-refundable)
Additional Children	\$ 50.00

**Registration fee is due upon receiving paperwork.**

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### MONTHLY TUITION (INCLUDES CURRICULUM)

PreK3 – PreK4

Tuition Fee: \$350.00 (Flat rate, no discounts apply)

Kindergarten - 1<sup>st</sup> Grade

Tuition Fee: \$ 250.00

2<sup>nd</sup> - 8<sup>th</sup> Grade

Tuition Fee: 1 <sup>st</sup> Child	\$ 225.00
2 <sup>nd</sup> Child	\$ 200.00 (additional children from same family)

### TUITION PAYMENT

First tuition payment will be due on the 10<sup>th</sup> of August and each month thereafter on the 1<sup>st</sup>.  
A \$ 45.00 late fee will be charged if tuition is not paid by the 5 day grace period.

Upon using Tithely, any additional fees, not part of tuition, are the Payees responsibility.

**\* PLEASE MAKE CHECKS PAYABLE TO KINGSWAY FAMILY CHURCH \***

# Kingsway Leadership Academy

Student Information  
Term 2025 – 2026

Name: \_\_\_\_\_  
(Last) (First) (Middle)

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

School Last Attended: \_\_\_\_\_

Address of School: \_\_\_\_\_

## **FAMILY INFORMATION**

Name of Father: \_\_\_\_\_

Employment: \_\_\_\_\_

Be sure to list work number next to employer name

Position Held: \_\_\_\_\_

Name of Mother: \_\_\_\_\_

Employment: \_\_\_\_\_

Be sure to list work number next to employer name

Position Held: \_\_\_\_\_

Marital Status: (check one) Married [ ☐ ] Divorced [ ☐ ] Widow [ ☐ ] Separated [ ☐ ]

Legal Guardian Signature: \_\_\_\_\_

Who will be the authorized people to pick up your children?

1. \_\_\_\_\_ Relationship: \_\_\_\_\_

2. \_\_\_\_\_ Relationship: \_\_\_\_\_

3. \_\_\_\_\_ Relationship: \_\_\_\_\_

**Only those on the list will be able to pick up the child unless you send a signed written notice of approval.**

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**CHILDREN IN FAMILY OF SCHOOL AGE (IF NOT ATTENDING)**

Names of child(ren): \_\_\_\_\_

Age(s): \_\_\_\_\_

Reason they are not applying: \_\_\_\_\_

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**RELIGIOUS INFORMATION**

Church Attending: \_\_\_\_\_

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

Pastor: \_\_\_\_\_

Is the Child's Father a Believer in Jesus Christ? [YES] [NO]

Is the Child's Mother a Believer in Jesus Christ? [YES] [NO]

Has the applicant ever made a profession of faith in Jesus Christ? [YES] [NO]

### **MEDICAL INFORMATION**

Family Physician: \_\_\_\_\_

City: \_\_\_\_\_ Phone: \_\_\_\_\_

Does the child have any physical defects or allergies: \_\_\_\_\_

Explain: \_\_\_\_\_

Has the child received immunization for the following:

Diphtheria [   ]

Small Pox [   ]

Polio [   ]

(Please attach a copy of immunization record)

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### **SCHOLASTIC INFORMATION**

Has the student ever been expelled, dismissed, suspended, or refused admission to another school? [YES] [NO] If Yes Explain:

Has the student ever had disciplinary difficulties? [YES] [NO] If Yes Explain:

Has the student ever used Tobacco or drugs of any kind? [YES] [NO] If Yes Explain:

Please indicate academic level of students previous work:

Excellent [ ] Good [ ] Average [ ] Poor [ ]

Has the student ever failed in school? [YES] [NO] If Yes Explain:

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How did you hear about Kingsway Leadership Academy?

Reason for applying to Kingsway Leadership Academy?

**Application must be filled out completely before it can be processed. Application and the registration fees must accompany application and are not refundable. An interview between the Principal, the legal parent/guardian and the child will be required before final acceptance.**

# Kingsway Leadership Academy

## Permission for Dispensing Medicine



Dear Parents,

In order for the staff to dispense any medication to your child(ren) we must have permission. Any approved medication will be administered in the prescribed dosage and according to the need as determined by the school staff.

Please list and initial each medication that you are giving the school permission to administer to your child(ren). Blank lines are provided for you to list any medications you will be sending with your child. Please list the medication and the Child(s) name then initial to the left of the line.

On the bottom of the form please state any medication that your child(ren) are allergic to. Thank you for your cooperation.

Sincerely,

King's Way Leadership Academy

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### Medications Sent By Parents

<u>Details</u>	<u>Name of Medication</u>	<u>Student's Name</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

List Any Medication Your Child is Allergic To:

_____	_____	_____
_____	_____	_____
_____	_____	_____

# Kingsway Leadership Academy

## Permission Statement

Field Trips are planned to enrich your child's educational experience. Such trips are taken under the supervision of a teacher, and of course, all precautions will be taken to ensure your child is as safe on such a trip as He/She is at school. Authorization on this form will help avoid your child missing a trip opportunity due to failure to return a permission slip.

I give KING'S WAY LEADERSHIP ACADEMY permission to include my child in all school activities and school sponsored trips away from the school premises. I agree to hold the school and its agents harmless for any accidents or injury to my child.

Student's Name: \_\_\_\_\_

Parent's Name: \_\_\_\_\_

Date: \_\_\_\_\_



# *Kingsway Leadership Academy*

## PARENT-SCHOOL AGREEMENT

IN ORDER TO SOLEMNIFY the desire of the undersigned parties to glorify the Lord with their obedience to Him and to promote a clear understanding of the duties and responsibilities of each party, the undersigned parties adopt the following agreement:

I \_\_\_\_\_, for and in consideration of my child, \_\_\_\_\_, being admitted as a student at King's Way Leadership Academy, do hereby accept such admission and the duties and responsibilities entailed therein and agree to be bound by terms of this Agreement:

1. I subscribe without reservation to the Articles of Faith and Standard of Conduct of King's Way Leadership Academy and agree that my family will abide by these Articles of Faith in all aspects of our lives, both at and away from school functions. I am a member of \_\_\_\_\_, faithfully attending all public services and taking an active part in the total church program.
2. I have read and understand the student handbook and I agree with it completely. I agree that my child and I must abide by all of the policies, rules and regulations of the school, including those listed in the student Handbook, and I agree to support King's Way Leadership Academy with my conduct and my prayers.
3. I understand and agree that the education of my child will be guided by Supervisors and other school officials. I agree that my purpose in obtaining a Christian education for my child will be achieved by following the curriculum set by Supervisors. To that end, I agree that I will require my child to perform all duties and responsibilities entrusted to him by the Supervisors and school officials to the best of his/her ability to their satisfaction. I will support the decisions of the Supervisor and school officials and will never attempt to undermine their authority. I understand and agree that during my child's enrollment the courses offered and the Supervisors teaching them may change from time to time in the discretion of the school leadership.
4. I understand and agree that my child has no right to publish and distribute a student newsletter or any other publication. I understand and agree that King's Way Leadership Academy, has the right, in its sole discretion, to control what is published, circulated, or otherwise distributed at its school to its students or staff, and I will ensure that my child understands this provision.
5. I understand and agree that attending King's Way Leadership Academy is a privilege and the school reserves the right to suspend or expel my child from school in accordance with its official policies as determined by the school. Notwithstanding anything to the contrary contained herein, this Agreement does not bind either party to any specific period of enrollment. Either party may terminate this Agreement without cause upon (7) days written notice. I understand that no rights or presumptions of continued enrollment are conferred or implied by this Agreement or by a number of consecutive Agreements. I further agree that no right to notice of renewal or nonrenewal of the Agreement is conferred or implied.
6. I agree to pay all tuition and fees in a timely manner as set forth in King's Way Leadership Academy's Financial Information Statement. I understand that monthly tuition payments are due by the tenth day of each month. I further understand that if I fail to make a timely payment, my child will be withdrawn from school and I may be subject to late-payment fees and other costs, including any necessary costs of collection in accordance with policy.



7. As King's Way Leadership Academy is a Christian ministry organization, both parties agree that they would never make demands, threaten to sue, or actually litigate any matter whatsoever relating to or resulting from this Agreement. I understand that making demands, threatening to sue or actually litigating a matter against King's Way Leadership Academy clearly violates Biblical teaching and practice and shall constitute sufficient grounds for immediate withdrawal of all my children from enrollment at King's Way Leadership Academy I understand that retaining or instructing an attorney to contact King's Way Leadership Academy with regard to a potential claim or dispute will be interpreted as a threat to sue. Accordingly, the parties agree to resolve all potential claims, disputes or causes of action through binding arbitration using the procedures outlined in the attached procedures.

- a. I agree to follow the Biblical pattern of Mathew 18:15-17 and Galatians 6:1 and always give good report. All differences are to be resolved by utilizing Biblical principals- always presenting a united front .
- b. The parties agree that the methods outlined in this section (§7) shall be the sole remedies for any and all controversies or claims arising out of the enrollment relationship or this Agreement and expressly waive their right to file a lawsuit against one another in any civil court for such disputes, except to enforce a legally binding arbitration decision.
- c. I acknowledge that I have read and understand the Procedures for Arbitration adopted by and agree King's Way Leadership Academy to abide by the procedures outlined therein.
- d. I agree to do everything in my power to avoid involving King's Way Leadership Academy in any legal proceedings, which may take place or legal requests for documents or testimony of school officials concerning the custody and/or education and upbringing of my child. I understand that if, in spite of my and my attorney's best efforts, any school official is legally compelled to provide testimony or documentation beyond a copy of my child's standard academic records, that my child may be immediately disenrolled from King's Way Leadership Academy and that my account may be charged for any and all expenses incurred in complying with such legal process.

8. The parties agree that there are no other agreements or understandings between them relating to the subject matter of this Agreement. This Agreement supercedes all prior agreements, oral or written, between the parties and is intended as a complete and exclusive statement of the agreement of the parties. Neither this Agreement nor its execution have been induced by any reliance, representations, stipulations, warranties, agreements or understandings of any kind other than those expressed herein. If any provision of this agreement is found to be void or voidable, it shall not affect the validity of any other provision. Both parties shall remain bound by all other provisions.

9. I certify that I will explain this agreement and its meaning to my child. I will assist the school in every way necessary to ensure my child abides by all the terms of this agreement.

10. I understand that this Agreement shall not take effect until fully executed by all parties.

IN WITNESS WHEREOF, the parties have executed this Agreement on the \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_.

BY \_\_\_\_\_  
Mother

BY \_\_\_\_\_  
Father

I understand this agreement and its content and agree to abide by its terms and all rules which apply students.

BY \_\_\_\_\_  
Student(Age 12 and above)

ACCEPTED AND APPROVED BY Principal: \_\_\_\_\_