



**LIFE PREPARATORY ACADEMY**

3841 N. Meridian  
Wichita KS 67204  
316-838-1243

2015-2016

Last Grade Completed \_\_\_\_\_

***Mission Statement:***

***Life Preparatory Academy is dedicated to training young people to be leaders of tomorrow through a rigorous, college preparatory education.***

**Student Information**

**Name:** \_\_\_\_\_ Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Address \_\_\_\_\_  
Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Date of Birth \_\_\_\_\_ Student home phone \_\_\_\_\_ Student cell phone \_\_\_\_\_

**Family Information**

Father's name \_\_\_\_\_ Father's home phone \_\_\_\_\_

Father's address \_\_\_\_\_ Father's cell phone \_\_\_\_\_

Father's employment \_\_\_\_\_ Father's work phone \_\_\_\_\_

Father's email address \_\_\_\_\_

Mother's name \_\_\_\_\_ Mother's home phone \_\_\_\_\_

Mother's address \_\_\_\_\_ Mother's cell phone \_\_\_\_\_

Mother's employment \_\_\_\_\_ Mother's work phone \_\_\_\_\_

Mother's email address \_\_\_\_\_

Parents' marital status: Married \_\_\_ Separated \_\_\_ Divorced \_\_\_ Widowed \_\_\_ Partnered \_\_\_

Other children at home: \_\_\_\_\_ age \_\_\_\_\_ age \_\_\_\_\_

\_\_\_\_\_ age \_\_\_\_\_ age \_\_\_\_\_

**Religious information**

Church home \_\_\_\_\_ How long \_\_\_\_\_

Father: Christian Yes \_\_\_ No \_\_\_ Mother: Christian Yes \_\_\_ No \_\_\_ Applicant: Christian Yes \_\_\_ No \_\_\_

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I affirm all information in this application is true and accurate to the best of my knowledge.

Father's or Guardian's Signature \_\_\_\_\_ Date \_\_\_\_\_

Mother's or Guardian's Signature \_\_\_\_\_ Date \_\_\_\_\_

## Field Trip/ Consent and Release Form

Life Preparatory Academy believes that out of school field trips enhance the learning process. We plan different field trips throughout the year and also take advantage of programs or presentations that present themselves throughout the school year. The following is a permission slip which allows Life Preparatory Academy teachers to take your child on field trips that we deem are of educational value and will make the learning process enjoyable.

I give Life Preparatory Academy permission to take my child on field trips planned for my child's education. Transportation will be arranged by the school with my child's safety in mind.

Father's or Guardian's Signature \_\_\_\_\_ Date \_\_\_\_\_

Mother's or Guardian's Signature \_\_\_\_\_ Date \_\_\_\_\_

### Medical Information

If my child has any medical condition/s which may be relevant to a physical emergency, I have listed them below. In the event of an emergency, I may be reached at the numbers below. If I cannot be reached, I hereby authorize Life Preparatory Academy Representative to make emergency medical decisions for my child. If there are any activities I do not want my child to be involved in, I have listed them below under "Special Comments". I understand and hereby agree to assume all of the risks which may be encountered on said activity, including activities preliminary and subsequent thereto. I do hereby agree to hold Life Preparatory Academy and its agents and employees, harmless from any and all liability, actions, cause of actions, claims, expenses, and damages of account to my activity of participation in other associated activities.

I state that I have carefully read the foregoing release and know the contents thereof and I sign this release as my own free act. This is a legally binding agreement which I have read and understand.

In case of an emergency, I authorize the staff of Life Preparatory Academy to render whatever first aid is deemed necessary including notification of Emergency Services. If I cannot be reached, my child will be sent to the nearest emergency room, if necessary. I understand this consent is given in advance of any specific diagnosis or treatment being required. Life Preparatory Academy does not assume responsibility for the payment of hospital, doctor, or ambulance fees.

Insurance Co. \_\_\_\_\_ Policy Holder \_\_\_\_\_ Policy Number \_\_\_\_\_

Child's Physician \_\_\_\_\_ Phone Number \_\_\_\_\_

Hospital Preference \_\_\_\_\_ Allergies or any other information that we might need to know about your child's health \_\_\_\_\_

Mother's phone (home) \_\_\_\_\_ (work) \_\_\_\_\_ (cell) \_\_\_\_\_

Father's phone (home) \_\_\_\_\_ (work) \_\_\_\_\_ (cell) \_\_\_\_\_

Other Emergency Contact Name:

1. \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

**Immunization Records:** Please provide the school with an updated copy of your child's immunization records or a Medical/Religious exemption letter stating why the student is not up-to-date or receiving vaccinations.

# Parental Agreement

## Standards of Conduct:

I have read and understand the Student Handbook of Life Preparatory Academy and agree that my child(ren) will abide by them both at and away from school functions. I agree to fully support the school in its enforcement of its rules. As Life Preparatory Academy is a Christian ministry organization, I agree not to make demands, threaten to sue, make any kind of accusation or complaint, or actually litigate any matter whatsoever relating to or resulting from enforcement of the rules in the Student Handbook.

Father's Initials \_\_\_\_\_ Mother's Initials \_\_\_\_\_

## Financial Obligation:

I hereby pledge to pay my financial obligations to Life Preparatory Academy on the date due and understand that it may be necessary to withdraw my student if proper arrangements are not made on a past due account. I also understand that if my child is dismissed from this school for failure to comply with the established regulations and discipline, I am still responsible for any and all unpaid tuition, sports fees, book fees, and any other money due the school by me. Also, I understand that tuition payments are nonrefundable.

Father's Initials \_\_\_\_\_ Mother's Initials \_\_\_\_\_

## Binding Arbitration Agreement:

The parties of this agreement agree to resolve any conflict between them outside of court. Parties will seek an arbitrator that can follow with the rules and procedures laid out at [peacemaker.net](http://peacemaker.net). The arbitrator will be a person who is trained in these rules. Judgment upon an arbitration decision may be entered in any court otherwise having jurisdiction. The parties understand that these methods shall be the sole remedy for any controversy or claim arising out of this agreement and expressly waive their right to file a lawsuit in any civil court against one another for such disputes, except to enforce an arbitration decision. As part of the Arbitration Aware, the arbitrator(s) shall allocate the fees and costs of the arbitration along with reasonable attorney's fees and other reasonable costs and expenses to the prevailing party in any manner that the arbitrator(s) considers to be reasonable.

Father's Initials \_\_\_\_\_ Mother's Initials \_\_\_\_\_

## Student's History Disclosure:

Has/does your child have an I.E.P? Yes \_\_\_ No \_\_\_

Has/does your child have a 504 Plan? Yes \_\_\_ No \_\_\_

Has your child ever been expelled from another school? (public or private) Yes \_\_\_ No \_\_\_

I have read and understand the above information, and have answered any questions to the best of my knowledge.

Father's or Guardian's Signature \_\_\_\_\_ Date \_\_\_\_\_

Mother's or Guardian's Signature \_\_\_\_\_ Date \_\_\_\_\_

## Consent to Post Pictures and/or Record Students for Use on Communication Mediums

I give my permission and authorize Life Preparatory Academy, to videotape and/or photograph, for use in various formats of communication, and for the purposes within Life Preparatory Academy's mission of teaching and public service. Distribution methods may include, but are not limited to the classroom, television commercials, the Internet (including Life Preparatory Academy Facebook page and the Life Preparatory Academy website, lifeprep.us or Word of Life Ministries website, WOLM.org) print publications or any other medium now existing or later created.

\_\_\_\_\_  
Parent or Guardian Signature

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

### Statement of Honor (Student)

I will seek to be willing to be teachable in the areas of personal character. I know that it is important to learn how to respect and honor God, my teachers, my classmates, myself, and those whom God has placed as leaders in my life. By signing this form, I am committing to be *open to learn* how to be honoring to those listed above to the best of my ability.

Student Signature \_\_\_\_\_ Date: \_\_\_\_\_

### Permission to Pick-up my child/ren

I, \_\_\_\_\_, give permission for the following people/s to pick up my child/ren

\_\_\_\_\_, \_\_\_\_\_  
\_\_\_\_\_, \_\_\_\_\_

from school.

|          |              |        |
|----------|--------------|--------|
| 1. _____ | _____        | _____  |
| Name     | Relationship | Phone# |

|          |              |        |
|----------|--------------|--------|
| 2. _____ | _____        | _____  |
| Name     | Relationship | Phone# |

This person/s may **NOT** pick up my child:

\_\_\_\_\_  
\_\_\_\_\_