LAKE PREP SCHOOL
L.P.S.

ENROLLMENT FORM

2017-2018 SCHOOL YEAR
ENTERING GRADE LEVEL

K-8

STUDENT INFORMATION

FIRST NAME   LAST NAME   MIDDLE

SOCIAL SECURITY NUMBER   BIRTHDATE   GENDER

PARENT/GUARDIAN INFO.

( )   -   ( )   -

PHONE (PRIMARY NUMBER)   PHONE (SECONDARY NUMBER)

FATHER'S FIRST NAME   LAST NAME

MOTHER'S FIRST NAME   LAST NAME

EMAIL ADDRESS

HOME ADDRESS

CITY   **F** **L**   ZIP CODE
STATE

EMERGENCY INFORMATION

CONTACT NAME (PRIMARY)   ( )   -
                                                             CONTACT PHONE

CONTACT NAME (SECONDARY)   ( )   -
                                                             CONTACT PHONE

ANY ALLERGY / MEDICATION: _____

ADDITIONAL INFORMATION: _____

LAKE PREP SCHOOL
L.P.S

ENROLLMENT FORM
2017-2018 SCHOOL YEAR
MEDICAL INFORMATION

STUDENT

FIRST NAME

LAST NAME

MIDDLE

MEDICAL RECORD

D R.

PHYSICIAN NAME

( ) -

OFFICE PHONE

FLORIDA LAW REQUIRES THAT EVERY STUDENT ENROLLING IN A FLORIDA SCHOOL BE PROPERLY IMMUNIZED OR HAVE A SIGNED WAIVER ON FILE AT THE SCHOOL. IN ADDITION, THIS RECORD MUST BE ON A FLORIDA FORM. CHILDREN ENTERING OR ATTENDING THE 7TH GRADE WILL ALSO BE REQUIRED TO HAVE COMPLETED THE FOLLOWING: HEPATITIS B VACCINATION SERIES, A SECOND MEASLES VACCINATION OR MMR AND A TETANUS-DIPHTHERIA BOOSTER. IF THE IMMUNIZATION RECORD OR SIGNED WAIVER IS NOT ON FILE, IN ACCORDANCE WITH THE LAW, STUDENT WILL NOT BE PERMITTED TO ATTEND *LAKE PREPARATORY SCHOOL*.

MEDICAL INSURANCE

POLICY HOLDER NAME

POLICY NUMBER

MEDICAL RELEASE

IN THE EVENT OF AN EMERGENCY OR NON-EMERGENCY SITUATION REQUIRING MEDICAL TREATMENT, I GRANT PERMISSION FOR ANY AND ALL MEDICAL AND/OR DENTAL ATTENTION TO BE ADMINISTERED TO MY CHILD IN THE EVENT OF AN ACCIDENTAL INJURY OR ILLNESS. THIS PERMISSION INCLUDES, BUT IS NOT LIMITED TO, THE ADMINISTRATION OF OVER THE COUNTER MEDICATION (ADMINISTERED ACCORDING TO DIRECTION ON LABEL), FIRST AID, AND THE USE OF AN AMBULANCE FOR EMERGENCY IN THE EVENT MY CHILD HAS TO BE TRANSPORTED TO A HOSPITAL.

I UNDERSTAND THAT LAKE PREPARATORY SCHOOL, THEIR EMPLOYEES, AND REPRESENTATIVES WILL HAVE THE SAFETY OF MY CHILD IN THEIR BEST INTEREST AND WILL ATTEMPT TO CONTACT ME AND/OR THE EMERGENCY CONTACT PERSON AT THEIR EARLIEST CONVENIENCE.

MY SIGNATURE ALSO SERVES TO INDICATE MY WILLINGNESS TO PAY ALL COSTS AND EXPENSES INCURRED IN CONNECTION WITH SUCH MEDICAL AND/OR DENTAL SERVICES RENDERED TO MY CHILD. I AGREE TO HOLD HARMLESS *LAKE PREPARATORY SCHOOL*, THEIR EMPLOYEES, AND REPRESENTATIVES FROM ANY AND ALL LIABILITIES AND CLAIMS FOR PERSONAL INJURY, ILLNESS OR DEATH, AS WELL AS PROPERTY OR PERSONAL DAMAGE AND EXPENSES OF ANY NATURE WHATSOEVER. THIS CONSENT AND RELEASE WILL BE IN EFFECT FOR THE CURRENT SCHOOL TERM AND WILL TERMINATE THEREAFTER.

PARENT/GUARDIAN SIGNATURE

DATE

STUDENT

FIRST NAME | LAST NAME | MIDDLE

TUITION FEES

EACH CHILD'S TUITION IS BASED ON A FULL SCHOOL YEAR'S ENROLLMENT OF 10 MONTHS. **A NONREFUNDABLE ADVANCE OF $500 IS REQUIRED FOR ENROLLMENT FOR EVERY CHILD**. THIS ADVANCE PAYMENT WILL BE DEDUCTED FROM THE TOTAL TUITION AMOUNT.

IF ENROLLED BEFORE THE START OF THE SCHOOL YEAR: $7,100   (ANNUAL BASE PRICE)

         - 500   (MINUS ADVANCE)

         $ 6,660

$660.00 (10 MONTHLY PAYMENTS) or **$555.00** (12 MONTHLY PAYMENTS)

PAYMENT PLAN

FOR YOUR CONVENIENCE, YOU CAN SELECT TO MAKE EQUAL 10 or 12 MONTHLY PAYMENTS, WHICH ARE BASED ON THE SCHOOL'S YEARLY TUITION, TWO PAYMENTS FOR THE SCHOOL YEAR, OR ONE PAYMENT. PLEASE SELECT YOUR PAYMENT FROM BELOW.

[ ] **10 EQUAL PAYMENTS**   [ ] **12 EQUAL PAYMENTS**

         10 Monthly EQUAL PAYMENTS OF $ 660.00

         12 MONTHLY EQUAL PAYMENTS OF $550.00

[ ] **TWO EQUAL PAYMENTS**

     Two EQUAL PAYMENTS OF $ 3,263.40 (2% DISCOUNT) plus $500 deposit

     *FIRST PAYMENT DUE BEFORE **JULY 1ST**, SECOND PAYMENT DUE BEFORE **DECEMBER 1ST***

[ ] **ONE TIME PAYMENT**

     One PAYMENTS OF ONLY $ 6327.00 (5% DISCOUNT) plus $500 deposit

     (*PAYMENT IS DUE BEFORE **JULY 1st** TO RECEIVE FULL DISCOUNT*)

TUITION FEES ARE DUE BY THE 10TH DAY OF EACH MONTH. A FEE OF $25 WILL BE CHARGED FOR ALL LATE PAYMENTS. TWO CONSECUTIVE MONTHS OF NO PAYMENT WILL RESULT IN YOUR CHILD BEING EXPELLED FROM LAKE PREPARATORY SCHOOL.

_____

PARENT/GUARDIAN SIGNATURE   DATE