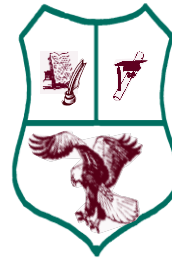


# Cornerstone Schools

4888 Browns Bridge Road, Cumming Ga. 30041  
(770) 205-8202 • (770) 205-6860  
www.cornerstonesch.com



## Information and Instructions-Kindergarten Readiness

- Completion of the application process and all applicable forms is the responsibility of the student's parent(s) or guardian.
- Please type or print clearly.
- The application/registration fee of \$150.00 must accompany the completed application package and is non-refundable.

### Applicant Information

Grade Applying for \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_ Email Address \_\_\_\_\_

Applicant's Name \_\_\_\_\_

First Middle Last Called

Home Address \_\_\_\_\_

Subdivision \_\_\_\_\_ Home Phone \_\_\_\_\_

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_ Age on Sept. 1<sup>st</sup> \_\_\_\_\_

Current School & System \_\_\_\_\_ Grade \_\_\_\_\_

School Address \_\_\_\_\_ Phone \_\_\_\_\_

Sibling Names	Age	School/College
_____	_____	_____
_____	_____	_____
_____	_____	_____

Extra-curricular Activities/Interests  
\_\_\_\_\_  
\_\_\_\_\_

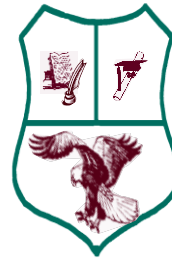
Has the applicant ever been suspended, dismissed/expelled or asked to withdraw? \_\_\_\_\_

Has the applicant ever been diagnosed and/or received services for behavioral problems, taken medication for ADHD or ADD? \_\_\_\_\_

If yes, please explain. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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## Family Information

Applicant's Name \_\_\_\_\_

Mother's/Guardian's Name \_\_\_\_\_ Home Phone \_\_\_\_\_

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

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

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

Business Phone Number \_\_\_\_\_ Ext. \_\_\_\_\_ Cell Phone \_\_\_\_\_

Father's/Guardian's Name \_\_\_\_\_ Home Phone \_\_\_\_\_

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

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

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

Business Phone Number \_\_\_\_\_ Ext. \_\_\_\_\_ Cell Phone \_\_\_\_\_

Are parents divorced? \_\_\_\_\_ If yes, who has legal custody? \_\_\_\_\_

Applicant lives with: \_\_\_\_\_

### Applicant May Be Released To The Persons Listed Below:/Emergency Contacts

1. Name. \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Relationship to Child \_\_\_\_\_ Relationship to Parent \_\_\_\_\_

2. Name. \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Relationship to Child \_\_\_\_\_ Relationship to Parent \_\_\_\_\_

Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

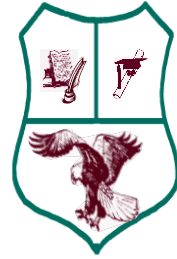
3. Name. \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Relationship to Child \_\_\_\_\_ Relationship to Parent \_\_\_\_\_

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## Medical Information

Applicant's Full Name \_\_\_\_\_ Age \_\_\_\_\_ DOB \_\_\_\_\_  
Address \_\_\_\_\_

SPECIAL MEDICAL NEEDS: (Physical or mental problems, mental retardation or developmental disabilities.) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PRESCRIBED DAILY MEDICATION: \_\_\_\_\_  
TIME \_\_\_\_\_ AMT. \_\_\_\_\_  
DR. NAME \_\_\_\_\_ PHONE # \_\_\_\_\_

Should my child become ill during the time that he/she is in the care of Cornerstone Schools or suffer an accident of any nature the school will undertake to contact me immediately and shall be authorized to secure such medical attention and care for my child as may be necessary. (The parent/guardian shall assume responsibility for payment.)

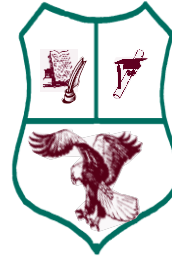
I do \_\_\_\_\_ do not \_\_\_\_\_ wish to purchase insurance on my child at a cost of \$20.00 per year. I understand that Cornerstone Schools is not RESPONSIBLE for any accident that this policy may cover.

Parent's/Guardian's Signature \_\_\_\_\_ Date \_\_\_\_\_  
Emergency Phone Numbers # \_\_\_\_\_

Parent's/Guardian's Signature \_\_\_\_\_ Date \_\_\_\_\_  
Emergency Phone Numbers # \_\_\_\_\_

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## Enrollment Information

### Enrollment:

Cornerstone Schools will not deny enrollment to any child based upon race, creed, sex, or national origin. All enrollments are done on a trial basis, and Cornerstone Schools reserves the right to terminate the enrollment if the program does not meet the needs of the child.

**School Hours:**..... 8:30 AM to 2:00 PM (August to May)      School is open for drop off at 8:15 am.

**Uniform:** ..... All students are required to wear uniforms.

### Enrollment Requirements:

Complete/Submit the following forms:

- Application Information
- Family Information
- Medical Information
- Enrollment Agreement
- A copy of your child's birth certificate
- A current health & immunization form

### Tuition

Kindergarten Readiness      \$6800.00

A (\$1500.00) non- refundable deposit is due within thirty days upon acceptance into the school.

### Fees

Registration Fee      \$150.00 non-refundable

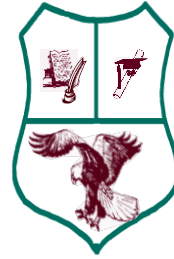
### Other Tuition

Before & After School      \$2000.00 Yearly

Before & After School /Holiday      \$2200.00 Yearly

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## Tuition Agreement

**Tuition-\$6800.00**

**Registration-\$150.00 Due with application.** (non-refundable)

**Fees:-\$450.00** (Book, Activity, Technology) **Due June 1<sup>st</sup>.**

**Deposit-\$1500.00** (non-refundable).

---

**Cornerstone Schools offers several tuition payment plans. Choose the one that best meets your needs**

**Tuition Payment Plans:** (\$6800.00 less deposit \$1500.00= \$5300.00) /Sibling Discount

\_\_\_\_\_ **Tuition Plan 1**-One Payment-(\$400.00 Discount). **Due on or before June 1<sup>st</sup> - \$4900.00.**

\_\_\_\_\_ **Tuition Plan 2**-Two Payments-(\$200.00 Discount) **Due June 1<sup>st</sup> -\$2550.00. Due December 1<sup>st</sup>-\$2550.00**

\_\_\_\_\_ **Tuition Plan 3**-(10 Payments) - **\$530.00 is due on or before June 1st. and on or before the 1<sup>st</sup> of each month.**

**Sibling Tuition:** (\$5800.00 less deposit \$1500.00 = \$4300.00) plus above stated fees.

\_\_\_\_\_ **Tuition Plan 1**-One Payment-(\$400.00 Discount). **Due on or before June 1<sup>st</sup> - \$3900.00**

\_\_\_\_\_ **Tuition Plan 2**-Two Payments-(\$200.00 Discount) **Due June 1<sup>st</sup> -\$2050.00. Due December 1<sup>st</sup>-\$2050.00**

\_\_\_\_\_ **Tuition Plan 3**-(10 Payments) - **\$430.00 is due on or before June 1st. and on or before the 1<sup>st</sup> of each month.**

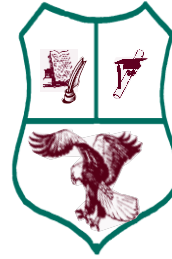
I have read the conditions and terms of admission above and hereby agree to abide by them. I agree to full and timely payment of all fees and tuition in accordance with the Enrollment Contract. No refund or release of agreement will be issued due to absence, withdrawal or dismissal.

Parent's/Guardian's Signature:\_\_\_\_\_Date\_\_\_\_\_

Parent's/Guardian's Signature:\_\_\_\_\_Date\_\_\_\_\_

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## Before/After-School Agreement

### Before/After-School Program (August to May)-\$2000

This program includes before and after school (6:30 a.m. to 7:45 a.m. and 3:00 p.m. to 6:30 P.M.) (No Holidays)

I would like to enroll my child \_\_\_\_\_ In the Before & After School Program

(Please check one of the following.)

#### I agree to pay:

One Payment Plan-(\$200-.00 Discount) \_\_\_\_\_ \$1800.00 (Due Aug. 1<sup>st</sup>.)

Two Payment Plan-(\$100.00 Discount) \_\_\_\_\_ \$1900.00 (\$950.00 Due Aug. 1<sup>st</sup> & Dec. 1<sup>st</sup>)

Monthly Payment Plan \_\_\_\_\_ \$200.00 Monthly (Due On or before the 1<sup>st</sup>. of the month.)

School Holidays.....\$50.00 a Day

### Before/After-School Program & Holidays (August to May)-\$2200.00

This program includes before and after school (6:30 a.m. to 7:45 a.m. and 3:00 p.m. to 6:30 P.M.) and all school holidays, Christmas Break, Winter Break and Spring Break.

I would like to enroll my child \_\_\_\_\_ In the Before/After-School Program & Holidays.

(Please check one of the following.)

#### I agree to pay:

One Payment Plan- (\$200.00 Discount) \_\_\_\_\_ \$2000.00 (Due Aug. 1<sup>st</sup>)

Two Payments Plan-(\$100.00 Discount) \_\_\_\_\_ \$2100.00 (\$1050.00 Due Aug. 1<sup>st</sup> & Dec. 1<sup>st</sup>)

Monthly Payment Plan \_\_\_\_\_ \$220.00 Monthly (Due on or before the 1<sup>st</sup> of the month.)

I have read the conditions and terms of admission above and hereby agree to abide by them. I agree to full and timely payment of all fees and tuition in accordance with the Tuition Agreement. No rebate will be issued due to absence, withdrawal or dismissal.

Parent's/Guardian's Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent's/Guardian's Signature \_\_\_\_\_ Date \_\_\_\_\_