

Admission Process for First through Eighth Grades

Thank you for your interest on our school. The academic curricula in the elementary and middle school departments of the Crystal Cathedral Academy are academically accelerated. Students are scoring three to four years above grade level as an average in the elementary level. The students in middle school are scoring four to five years above grade level on the average. CCA also builds into the curriculum 5 specialists on top of the core curriculum. Elementary grades will have specialist classes two times a week through out the year. In middle school, each specialist subject is taken for one semester. The specialist subjects are Music, Drama, Visual Arts, Physical Education, and Bible. The specialist classes are graded and evaluated with the same weight as the academic classes.

Below you will find the 5 steps needed to apply to first through eighth grade at Crystal Cathedral Academy. Only complete applications will be accepted for registration consideration.

1. Download and complete Following:
 - Application for Admission
 - Family Commitment
 - Family Commitment Addendum (for single parent/blended families)
 - New Student Payment Plan
 - Student Information Form
 - Emergency Information Form
 - Ethnic Background Information
 - Internet Policy and Permission Form
 - Parking Lot Safety Policy
 - Drive-Thru Pick-up Application
 - Report of Health Examination for School Entry
 - Request for Student Records Form

2. Include the following original documents: (I will make the copy after verification)
 - Birth Certificate or Passport
 - Immunization Record
 - Report Card & standardized testing (i.e. Stanford 9, Iowa)
 - Two self- addressed envelopes (no stamp required)

3. Turn in all above registration materials and non-refundable registration fee of \$500 to the Registrar, Mrs. Mulady, in the academy/high school office.

4. Mrs. Mulady will schedule an interview for you to meet with the principal.

5. You will be notified by mail of acceptance/regrets.

APPLICATION FOR ADMISSION

Date of application: _____

STUDENT INFORMATION

Last Name	First Name	Middle	Grade applying for:
Date of Birth	Age	Student Social Security	
Address	City	State	Zip Code
Home Phone	Birthplace (City, State)	Male	Female
Father's Name		Mother's name	
Father's Social Security		Mother's Social Security	
Father's Email		Mother's Email	
Work Phone		Work Phone	
Employer		Employer	
Type of Work		Type of Work	

Student Resides with:(circle) Mother/Father Mother only Father only Other

Legal Guardian(s): _____

Has the student had problems with any of the following:(circle)
 Academics Dicipline Social Adjustment Civil Authority

Give a brief explanation: _____

NAMES OF SIBLINGS AND BIRTHDATES

Name	Birthdate
1	
2	
3	
4	

CCA POLICY STATES THAT CORRESPONDANCE BE SENT TO ONE MAILING ADDRESS:

Person to whom mail is sent: _____

Address	City	State	Zip Code
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HOW DID YOU HEAR ABOUT OUR SCHOOL?

Friend Website Other

Name of Refering Family: _____

PERFORMING ARTS INVENTORY

CCA is a school for the performing arts. List any experience or interest the student has had in the following arts:

Singing

Dancing

Musical Instruments

Theater Arts

Visual Arts

Technical Arts (sound, lighting, sets, etc.)

REFERENCES

Church

Pastor, Youth Pastor, Sunday School Teacher

Address

City, State

Zip

Telephone

School

Teacher or Counselor

Teacher or Counselor

Address

City, State

Zip

Telephone

**CRYSTAL CATHEDRAL ACADEMY & HIGH SCHOOL
NEW STUDENT PAYMENT PLAN
'10-'11 School Year**

Student Name: _____

'10 - '11 Grade: _____

Father's Name: _____

Father's Email: _____

Mother's Name: _____

Mother's Email: _____

Billing Address: _____

Home Phone # _____

REGISTRATION FEES: \$500.00

*****Registration fees are NON-REFUNDABLE*****

Please initial your choice of payment plan:

_____ **One Payment** (Paid in Full Sept. 1st)

_____ **Two Payments** (Sept. 1st & Feb. 1st)

_____ **Ten Payments** (Sept. 1st – June 1st)

_____ **Twelve Payments** (July 1st – June 1st)*

*(You *MUST* be an accepted family by June 1st to qualify for the Twelve Payment Plan)

International Student Rates located on the International Student Application Link

NEW TUITION FEES:

TWELVE PAYMENT PLAN:

July '10 - June '11

*(Does Not include Summer Care
or MS/HS text books & materials)

Kindergarten – Fifth Grades

1st child \$457.50 per month

2nd child \$372.00 per month

3rd child \$312.50 per month

4th child \$263.50 per month

High School 9th – 12th Grades

1st child \$618.75 per month

2nd child \$533.00 per month

3rd child \$473.75 per month

4th child \$426.00 per month

Middle School 6th-8th Grades

1st child \$480.00 per month

2nd child \$393.50 per month

3rd child \$328.00 per month

4th child \$285.50 per month

NEW TUITION FEES:

TEN PAYMENT PLAN:

Sept. '10 - June '11

*(Does Not include Summer Care
or MS/HS text books & materials)

Kindergarten – Fifth Grades

1st child \$549.00 per month

2nd child \$446.00 per month

3rd child \$375.00 per month

4th child \$316.00 per month

High School 9th – 12th Grades

1st child \$742.50 per month

2nd child \$639.50 per month

3rd child \$568.50 per month

4th child \$511.00 per month

Middle School 6th-8th Grades

1st child \$576.00 per month

2nd child \$472.00 per month

3rd child \$393.50 per month

4th child \$342.50 per month

Crystal Cathedral Academy & High School
Family Commitment

We have read and understood the Crystal Cathedral Academy & High School’s Philosophy of Education, which are set forth in the Student Handbook. We are in agreement with the Biblical beliefs expressed in the School’s “Philosophy of Education.”

We understand that in choosing a Christian setting for the education of our child the Crystal Cathedral Academy & High School believe that is important for us to be responsible to establish and maintain a home and life environment which will support the Biblical teachings and beliefs of the Crystal Cathedral Academy & High School. We agree that our role as parent/legal guardian is crucial to the academic growth and success of our child and we will seek to be an example of beliefs taught by the Crystal Cathedral Academy & High School. We, as parents, accept the challenge to train up a child in the way he or she should go (Proverbs 22:6), and we do state that this training will be carried on in the home. We place our trust in the Crystal Cathedral Academy & High School to extend that training more completely.

We understand that in an era where images of family relationships and personal sexuality are often confused and distorted, the Crystal Cathedral Academy & High School believes that it is important to teach and model the biblical view. We understand that the Crystal Cathedral Academy & High School teaches with an age-appropriate curriculum, that sexual intimacy is intended by God to only be within the bonds of marriage between one man and one woman, and that it is in the context of a loving marriage between one man and one woman that God intends children to be born and raised. We acknowledge that we have been informed about the Crystal Cathedral Academy & High School policy and we agree to cooperate with the Crystal Cathedral Academy & High School in seeking to achieve its objectives in this regard.

We recognize that, as parent of a child at the Crystal Cathedral Academy & High School we will be given opportunities to participate in the education of our child through presence on the school campus, or involved in school activities.

We recognize that the Crystal Cathedral Academy & High School believes that the words and conduct of adults within the school setting can have an important influence on the growth and development of the students, and the ability of the Crystal Cathedral Schools’, to achieve its spiritual and academic view and objectives, and we agree that we will support them, both in word and deed, while on the school campus, or involved in school activities.

We hereby state that we have made a through investigation of the Crystal Cathedral Academy or High School program, curriculum, discipline, dress code, policies and procedures and we agree to make them our glad-hearted choice for the coming school year. We agree to abide by them and support the school in the established rules and regulations. We understand that failure of the parents or child to comply with the established regulations and discipline, or failure to meet financial obligations will forfeit the student’s privilege of attending the Crystal Cathedral Academy or High School.

Unresolved issues will be taken care of by using the Crystal Cathedral Academy & High School “chain of command” (1/Teacher, 2/Administrator, 3/ School Board).

Student Name: _____ Grade: __ Student Name: _____ Grade: __

Student Name: _____ Grade: __ Student Name: _____ Grade: __

Father’s Signature: _____	Mother’s Signature: _____
Print Name: _____	Print Name: _____
Date: _____	Date: _____

(If Applicable)

Step-Mother: _____	Step-Father: _____
Print Name: _____	Print Name: _____

Crystal Cathedral Academy & High School
Family Commitment (con't.)

We understand that we have an obligation to be actively involved in the education of our children. We agree to uphold and support the high academic standards of the Crystal Cathedral Academy & High School by providing a place at home for our children to study, and to give our child encouragement in the completion of homework assignments.

We will faithfully support the Crystal Cathedral Academy & High School through our prayers and positive attitude, and in keeping with Matthew 18:15 we are committed to giving a good report by sharing any complaints and negative comments only with the people involved.

We believe that discipline is necessary for the benefit of each student as well as for the entire school. We give permission to the teachers and administration to make and enforce regulations in a manner consistent with Christian principles and disciplines as set forth in the scriptures (Proverbs 13:24; 29:15 and 17; Colossians 3:20; Hebrew 12:5). We further agree that we will cooperate and discipline our child in the home as needed. We further agreed to abide by the Discipline Plan set forth in the Crystal Cathedral Academy or High School Handbook.

We pledge that if, for any reason, our child does not respond favorably to the Crystal Cathedral Schools, we will do everything in our power to cooperate with the Crystal Cathedral Schools to help make necessary adjustments. If these adjustments cannot be made, then we agree to quietly withdraw our child. We agree to pay our tuition on or before the first of each month beginning with the 1st of July and continuing for 12 months. We understand that a late charge will be added to my monthly amount, if payment is not made by the 10th of the month. We understand that failure to pay can result in the dismissal of my child from school. We further understand that there is an added charge for returned checks and for early drop off and late child pickup. It is the policy of Crystal Cathedral Academy & High School to make no refunds of fees or tuition payments once a child has been accepted for enrollment, or if a student is expelled.

We understand that assessments will be made to cover damages to the school, including breakage of windows, book damage, and abuse of other personal property caused intentionally by any student.

We will support the Crystal Cathedral Academy & High School by involvement in Parent-Teacher conferences, Open house, Parent-Teacher Fellowship activities, workdays, and other Academy & High School sponsored meetings and activities.

Student Name: _____ Grade: ___ Student Name: _____ Grade: ___

Student Name: _____ Grade: ___ Student Name: _____ Grade: ___

Father's Signature: _____ Mother's Signature: _____

Social Security # (required): _____ Social Security # (required): _____

Date: _____ Date: _____

(If Applicable)

Step-Mother: _____ Step-Father: _____

Print Name: _____ Print Name: _____

Single Parent Addendum (If Applicable)

I, as the registering parent, have signed the above Family Commitment from Crystal Cathedral Academy and High School. I understand it is my responsibility (not the School's) to notify the other parent that he/she must also sign this Family Commitment to communicate with Teachers, Administration, and the Office Staff with regards to our student.

Parent Signature: _____ Date: _____

C.C.S. EMERGENCY INFORMATION

Home phone #

Student: _____
 Last First Middle Initial Gender Grade Date of Birth

Student: _____
 Last First Middle Initial Gender Grade Date of Birth

Student: _____
 Last First Middle Initial Gender Grade Date of Birth

Address: _____ City: _____ Zip: _____

Father's Email: _____ Mother's Email: _____

Student resides with: (circle) Both parents Mother Father Other Primary Language spoken in the home: _____

List the contacts in the order to be called after parents for daily pick-up, illness, injury, and emergencies.

Contact First: (circle) Mom Dad

Mother/Guardian: _____
 Name Home # Work # Cell #

Father/Guardian: _____
 Name Home # Work # Cell #

3. Name Daytime Phone # Cell Phone # Relationship to child

4. Name Daytime Phone # Cell Phone # Relationship to child

5. Name Daytime Phone # Cell Phone # Relationship to child

6. Name Daytime Phone # Cell Phone # Relationship to child

7. Name Daytime Phone # Cell Phone # Relationship to child

8. Name Daytime Phone # Cell Phone # Relationship to child

9. Name Daytime Phone # Cell Phone # Relationship to child

1. Should a serious illness or an accident occur and school personnel are unable to contact the parent(s)/guardian(s) permission is hereby granted for medical care to be given as required (the undersigned parent/guardian will pay any fee involved).

Parent/Guardian Signature: _____

Date: _____

2. What health problems/allergies does this student have? _____

We authorize the school secretary/staff to give Tylenol when necessary. Circle: YES NO

May we publish your address/telephone number for CCA/CCHS and CC Ministry use? ____ Yes ____ No

REPORT OF HEALTH EXAMINATION FOR SCHOOL ENTRY

To protect the health of children, California law requires a health examination on school entry. Please have this report filled out by a health examiner and return it to the school. The school will keep and maintain it as confidential information.

PART I TO BE FILLED OUT BY A PARENT OR GUARDIAN

CHILD'S NAME—Last _____ First _____ Middle _____ BIRTH DATE—Month/Day/Year _____

ADDRESS—Number, Street _____ City _____ ZIP code _____ SCHOOL _____

PART II TO BE FILLED OUT BY HEALTH EXAMINER

HEALTH EXAMINATION

NOTE: All tests and evaluations except the blood lead test must be done after the child is 4 years and 3 months of age.

REQUIRED TESTS/EVALUATIONS	DATE (mm/dd/yy)
Health History	/ /
Physical Examination	/ /
Dental Assessment	/ /
Nutritional Assessment	/ /
Developmental Assessment	/ /
Vision Screening	/ /
Audiometric (hearing) Screening	/ /
Tuberculin Test (Mantoux/PPD)	/ /
Blood Test (for anemia)	/ /
Urine Test	/ /
Blood Lead Test	/ /
Other	/ /

IMMUNIZATION RECORD

Note to Examiner: Please give the family a completed or updated yellow California Immunization Record.
Note to School: Please record immunization dates on the blue California School Immunization Record (PM 286).

VACCINE	DATE EACH DOSE WAS GIVEN				
	First	Second	Third	Fourth	Fifth
POLIO (OPV or IPV)					
DtaP/DTp/DTTdT (diphtheria, tetanus, and [acellular] pertussis) OR (tetanus and diphtheria only)					
MMR (measles, mumps, and rubella)					
HIB MENINGITIS (Haemophilus influenzae B) (Required for child care/preschool only)					
HEPATITIS B					
VARICELLA (Chickenpox)					
OTHER					
OTHER					

PART III ADDITIONAL INFORMATION FROM HEALTH EXAMINER (optional) and RELEASE OF HEALTH INFORMATION BY PARENT OR GUARDIAN

I give permission for the health examiner to share the additional information about the health check-up with the school as explained in Part III.

Please check this box if you **do not** want the health examiner to fill out Part III.

- RESULTS AND RECOMMENDATIONS**
- Fill out if patient or guardian has signed the release of health information.
- Examination shows no condition of concern to school program activities.
 - Conditions found in the examination or after further evaluation that are of importance to schooling or physical activity are: (please explain)

Signature of parent or guardian _____ Date _____

Name, address, and telephone number of health examiner _____

Signature of health examiner _____ Date _____

If your child is unable to get the school health check-up, call the Child Health and Disability Prevention (CHDP) Program in your local health department. If you do not want your child to have a health check-up, you may sign the waiver form (PM 171 B) found at your child's school.

Student Information Form

*Crystal Cathedral Academy & High School
13280 Chapman Ave.
Garden Grove, CA 92840
PH. # 714-971-4159
FAX # 714-971-4028*

Please complete both pages of this form and return it directly to the Crystal Cathedral Academy and High School Admission Office at the above address.

Student's Name _____
(Last)
(First)
(Middle)

Applying to Grade _____ Beginning September, 20____

.....
 (To be completed by authorized staff persons at the school in which the student is currently enrolled.)

Name of School _____

Address _____
(City)
(State)
(Zip)

Telephone () _____

Principal's Name _____

Teacher's Name _____

In what capacity and for how long have you known the applicant?

Please indicate your ratings by numbers in the right-hand column. Use a question mark where you have insufficient evidence. Your candid estimate of the applicant will be of invaluable assistance to the Admissions Committee and your comments will be held in strict confidence.

Confidential Principal/Teacher Recommendation

	1.	2.	3.	4.	5.	Ratings
Academic Potential	Exceptionally Promising Student	Generally Strong Student	Average student, capable of satisfactory work	Below average ___ marginal ability ___ lacks motivation	Questionable Candidate	
Personal Qualities	Outstanding – Leads & Participates	Generally Strong	Average	Below Average, Immature	Very Immature For Age	
Emotional Stability	Exceptionally Stable	Well Balanced	Generally Well Balanced	___ Excitable ___ Unresponsive ___ Distractible	___ Hyper- emotional ___ Apathetic	
Summary	Outstanding	Above Average	Average	Below Average	Poor	

Student's Name _____
(Last) (First) (Middle)

1. Please comment on the applicant's attitude toward school _____

2. To your knowledge, has the applicant had any history of involvement with drugs, alcohol, or juvenile delinquency? Yes ___ No ___ if yes, please explain: _____

3. Has the applicant ever been suspended or expelled? Yes ___ No ___ if yes, please explain: _____

4. To your knowledge, has the applicant had any history of conduct or behavior problems? Yes ___ No ___ if yes, please explain: _____

5. Does the candidate have any history of learning disability or has he/she required any special help to meet academic requirements? Yes ___ No ___ if yes, please explain: _____

6. Additional comments, if needed. _____

Private Schools: Has this family been stable in fulfilling their financial obligations?

Yes ___ No ___ if no, please explain: _____

Teacher's Signature _____ Date: _____

Principal's Signature _____ Date: _____

REQUEST FOR STUDENT RECORDS

Dear Records:

The following student(s) have been withdrawn from your school. Please release the academic, attendance, and health records to the Crystal Cathedral Academy.

Student's Name
(Last Name 1st)

Date of Birth

Last grade attended

Releasing School:

School

Address

City

State

Zip

Phone #

1ST Request _____

2nd Request _____

3rd Request _____

Receiving School

Crystal Cathedral Academy

13280 Chapman Ave.

Garden Grove, CA 92840

RECEIVED:

Date: _____

By: _____

Signature of Parent/Guardian

Signature of Receiving School Secretary

Crystal Cathedral Academy & Crystal Cathedral High School
Ethnic Information Survey

Child's Name: _____

Grade: _____

We are asked by the State of California to supply ethnic background information for each of our students. Your completion of this form will assist us in correctly identifying your child's ethnic background. Completing this form is voluntary; however, it would be greatly appreciated.

Thank You.

Please circle the appropriate choice:

- | | |
|-----------------------------------|---------------------|
| 1- American Indian/Alaskan Native | 5- Black |
| 2- Asian | 6- White |
| 3- Filipino | 7- Pacific Islander |
| 4- Hispanic | |

Primary Language Codes (please circle appropriate choice)

00 English

11 Arabic

22 Hindi

41 Polish

12 Armenian

23 Hmong

06 Portuguese

42 Assyrian

24 Hungarian

28 Punjabi

13 Burmese

26 Indonesian

45 Rumanian

09 Cambodian (Khmer)

27 Italian

29 Russian

03 Cantonese

08 Japanese

30 Samoan

14 Croatian

04 Korean

31 Serbian

15 Dutch

10 Lao

01 Spanish

16 Farsi

25 Llocano

32 Thai

17 French

07 Mandarin

34 Tongan

18 German

44 Mien (Yao)

33 Turkish

19 Greek

88 Native American
Languages

35 Urdu

20 Guamanian (Chamorro)

55 Other Chinese

02 Vietnamese

43 Gujarati

66 Other Pilipino
(Tagalong)

99 All Other Languages

21 Hebrew

CCA/CCHS Acceptable Use Policy of Computers and the Internet

The Crystal Cathedral Academy & High School is pleased to offer students a computer network for classroom Internet. Our Internet is screened and updated daily by Websense, a firewall stronger than Surfwatch.

What is Possible?

Access to the Internet will enable students to explore thousands of libraries, databases, museums, and other repositories of information and to exchange classroom communication with other Internet users around the world. The use of Internet for educational projects will assist in preparing students for success in life and work in the 21st Century. Families should be aware that some material accessible via the Internet might contain items that are illegal, defamatory, inaccurate, or potentially offensive. While the purposes of the school are to use the Internet resources for constructive educational goals, students may find ways to access other materials. Every effort including the installation of blocking software will be used to limit access to inappropriate material. We believe that the benefits to students from access to the Internet in the form of information resources and opportunities for collaboration exceed the disadvantages. But ultimately, parents and guardians of minors are responsible for setting and conveying the standards that their children should follow when using media and information resources.

What is expected?

Students are responsible for appropriate behavior on the school's computer network just as they are in regular classroom or on a school playground. Communications on the network are often public in nature. General school rules for behavior and communication apply. It is expected that users will comply with school standards and the specific rules set forth below. The use of the network is a privilege, not a right, and may be revoked if abused. The user is personally responsible for his/her actions in accessing and utilizing the school's computer resources. The students are advised to never access anything that they would not want their parent or teachers to see. The fact that you can do something or think you can do something without being caught does not make it right to do so. Even if you don't get caught, there is always one person who will know whether you have done wrong- and that person is you. Your use of the Internet can be a mirror that will show you what kind of person you are.

What are the rules?

Privacy- Network storage areas may be treated like school lockers. Computer Lab administrators may review communications to maintain system integrity will insure students are using the system responsibly.

Illegal copying- Students will never download or install any commercial software, shareware, or freeware onto network drives or disks.

Inappropriate materials or language- No profane, abusive or impolite language will not be used to communicate nor will materials be accessed which are not in line with the rules of school behavior. A good rule is never view, send, or access materials, which you would not want your teachers and parents to see. If students encounter such material by accident, they must report it to their teacher immediately.

Succinct Advice

These are the guidelines to follow to prevent the loss of net work privileges at school.

1. Do not use a computer to harm other people or their work.
2. Do not damage the computer or the network in any way.
3. Do not interfere with the operation of the network by installing illegal software, shareware, or freeware.
4. Do not violate copyright laws.
5. Do not view or display any offensive messages or pictures.
6. **Do notify** the teacher immediately, if by accident, you encounter materials, which violate the miles of appropriate use.
7. **Be Prepared** to be held accountable for your actions and for the loss of privileges if any of the Rules of Appropriate Use are violated.

We would like to encourage you to use this as an opportunity to have a discussion with your child about family values and your expectations about how these values should guide your child's activities while they are on the Internet.

Sign and Return the attached Internet User Agreement to the school office.

Internet User Agreement

Parental Agreement

As a parent or guardian of a student at CCA/CCHS, I have read the Acceptable Use Policy about the appropriate use of computers and internet at school for educational purposes. I will support the school's use policy. I understand this agreement will be kept on file for the duration of time that my child is a student at the Crystal Cathedral Academy/Middle & High School.

Parent/Guardian Name (print) _____

Parent/Guardian Signature _____

Date _____

Student Agreement

As a user of the CCA/CCHS computer network, I agree to comply with the Acceptable Use Policy about the appropriate use of computers and internet at school. I agree to only use the network in a constructive manner for the duration of my attendance at the Crystal Cathedral Academy/ Middle & High School.

Student Name (print) _____

Student Signature _____

Grade _____

Date _____

Please Return This Form to the Office

Crystal Cathedral Parking Lot Safety

All vehicles operated on the grounds of the Crystal Cathedral Ministries must be operated and parked in a safe manner in accordance with the following policy.

The highest safety must go to the safe movement of the pedestrians. All vehicle traffic must yield to pedestrian traffic: our guests, visitors, UCI employees, children, and our staff.

The maximum vehicle speed, while on this campus is, **15 miles per hour**. This applies to all vehicles operated by staff, parents, High School drivers, visitors, business/service vehicles and commercial vehicles.

To ensure constant vigilance and concern for the safety of all people on Ministry property, Security and the Ministry management will be enforcing the following directives:

- First Offence:** Written description of violation and acknowledgement of receipt, including agreement to correct behavior.
- Second Offence:** The adult/HS student will be required to park at the designated entrance to the ministry. Parents will need to walk the child(ren) to be signed in/out for the duration of one week. HS students will have to walk to the school campus from the designated entrance to the ministry.
- Third Offence:** Suspension of driving privileges on this campus, duration to be determined. Receipt of a third offense could result in revocation of on campus driving privileges.

Long and Short Term Vehicle Parking

Citations will be issued to those parking in:

- Designated handicap parking (without proper tag).
- Loading and unloading areas (commercial vehicles).
- Special, not posted, but not open to the public (cones present, etc.).
- No overnight parking.

Family Life Center Parking

To facilitate the safe loading and unloading of the Preschool, Academy, and High School students; all parent and high school drivers must park in the FLC parking lot, in the North end, closest to the building.

UCI Medical center has leased the south end of the FLC parking lot. Do not park in this area. Please be mindful of UCI employees and the UCI shuttles that are on campus.

Parking Citations will be issues to persons parking in these areas without proper authorization. Citations will be handled in the same manner as stated above. The Ministry's policy covering all traffic and vehicular parking apply equally to all Ministry staff, volunteer personnel, Preschool families, Academy and High School families, High School Drivers, and/or adult supervisors, as well as commercial and business visitors.

High School Drivers

Crystal Cathedral High School drivers are required to use the far south entrance gate on Lewis when arriving and leaving the campus. High school drivers must park in the north end of the FLC parking lot.

Crystal Cathedral Parking Lot Safety Policy Agreement

I have read the Crystal Cathedral Parking Lot Safety Policy and agree to abide by this policy for the duration of time that our child/ren are attending the Academy/High School.

Student Name: _____ Grade: _____

Student Name: _____ Grade: _____

Student Name: _____ Grade: _____

Student Name: _____ Grade: _____

Parent Signature: _____ Date: _____

Parent Signature: _____ Date: _____

High School Drivers: also complete below

High School Driver Name: _____ Grade: _____

High School Driver Signature: _____ Date: _____

Parent Signature: _____ Date: _____

Parent Signature: _____ Date: _____

Drive Thru Pick-up Application

As a convenience for our parents, we have drive-thru pick-up by the school playground from 3:15-3:30 pm. If you wish to participate in this you do not need to get out of your car to sign-out your child(ren). However, you do need to complete and return this form to the school office. You will receive a brightly colored placard to place in your car windshield when you are in the drive-thru pick-up line.

At 3:15 the teachers will send all students to drive-thru that are participating in the program. The drive-thru staff will have the students seated on the grassy area within the safety zone. The name on the placard will be matched with your student when your car gets to the front of the line. Your student will then be placed into your car by a staff person and then you may exit out the gate. If you have not picked up your student(s) by 3:30 all students will be walked to and checked into Day Care. You do not need to call the office if you are not going to make it to drive-thru. Rest assured that your student will be taken care of and supervised at all times. Please also make your student aware of the procedure as we are unable to contact students during instructional times.

Release of Liability of the Crystal Cathedral Academy

The undersigned, parent or legal guardian of the student identified below, instructs, authorizes, and releases the Crystal Cathedral Academy of any liability. By signing this release, the parent or legal guardian is requesting and instructing the Crystal Cathedral Academy to release the below named student(s) to the designated driver, as indicated by the authorized placard.

Parent Signature: _____ Date: _____

Print Name: _____

Student Name: _____ Grade: _____

Student Name: _____ Grade: _____

Student Name: _____ Grade: _____

Student Name: _____ Grade: _____

Number of Placards requested: _____

Photograph/Media Release

Photographs of CCA and CCHS students as well as student work will be used for publicity purposes in various media, including school flyers, e-mail, internet, newspapers, computer communications, radio and television. No commercial use will be made of the photographs. No personal information or names will be released with the photographs or student work.