



**PARENTS**

Father's Name \_\_\_\_\_ Cell \_\_\_\_\_

Place of Employment \_\_\_\_\_ Work Phone \_\_\_\_\_

Email \_\_\_\_\_

Mother's Name \_\_\_\_\_ Cell \_\_\_\_\_

Place of Employment \_\_\_\_\_ Work Phone \_\_\_\_\_

Email \_\_\_\_\_

Are both parents the natural parents of the child?  Yes  No  
If not, do you have legal custody of the child?  Yes  No  
If child does not live with both parents, please specify which one.  Mother  Father  Other \_\_\_\_\_

Who will be responsible for tuition payments? \_\_\_\_\_

**GENERAL**

Has the applicant(s) been involved in any serious offenses for which he/she was suspended or dismissed?  
 Yes  No If so, please explain \_\_\_\_\_

Does the applicant(s) have any mental, emotional, or physical disabilities which would affect his/her physical activities or learning ability?  
 Yes  No If so, please explain \_\_\_\_\_

List all schools each applicant has attended:

Name	School	Dates	School	Dates	School	Dates

Has applicant ever been arrested or apprehended by the police?  Yes  No  
Does the applicant have any type of police record?  Yes  No  
Has the applicant ever been under the supervision of the courts or a probation officer?  Yes  No

If yes on any of these, please explain: \_\_\_\_\_

**STUDENT ACTIVITIES AND MEDICAL**

GCA students are expected to take part in school activities including sports, recess, P.E., and school-sponsored trips away from the school premises (except as specifically listed below). In the event that a student becomes ill or is injured while under school supervision, school authorities are authorized to take the following actions:

- A. Provide appropriate first aid and contact emergency personnel if necessary.
- B. Contact a parent or guardian of the student and follow their instructions.
- C. If no parent or guardian can be reached, contact the student's physician and follow his instructions.
- D. If the student's physician cannot be reached, the school authorities will use their own discretion in contacting a properly licensed practicing physician and follow their instructions.

Physician's Name \_\_\_\_\_ Phone \_\_\_\_\_

Please list any known allergies and any medical needs of which we should be aware or that could prevent full participation in school activities: \_\_\_\_\_

\_\_\_\_\_

## RELIGIOUS BACKGROUND

Describe a Christian in one sentence: \_\_\_\_\_

Is the spiritual growth of your child as important as academic growth?  Yes  No  
Does the family attend church?  Weekly  Monthly  Special Occasions  Not at all  
Does the family attend Sunday School?  Weekly  Monthly  Special Occasions  Not at all

Name of Church \_\_\_\_\_

Are the parents Christian? Has the student had a born-again experience with Jesus Christ?

Father	<input type="checkbox"/> Yes	<input type="checkbox"/> No	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Mother	<input type="checkbox"/> Yes	<input type="checkbox"/> No	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No

## STATEMENT OF FAITH

- We believe in the plenary, verbal inspiration of the Scriptures which guarantees their accuracy and establishes them as a man's only authoritative source and guide for life and faith.
- We believe in the One, True, Living, and Eternal God who exists equally in three persons: the Father, the Son and the Holy Spirit.
- We believe in the deity, virgin birth, vicarious atonement, bodily resurrection, and the imminent return of Jesus Christ for His Bride, the Church.
- We believe in the necessity of the new birth for all fallen man, which is a work of grace wrought by the Holy Spirit conditioned by a personal faith in Jesus Christ as one's own Lord and Savior.
- We believe in the local church and the church universal. The local church is constituted of an assembly of born-again believers who assemble to preach the Gospel, administer the ordinances, and practice Christian discipline. The universal church is made of all born-again believers of all areas and ages.

Do you accept the Statement of Faith as stated above?  Yes  No

## MISSION STATEMENT

It is the mission of Gateway Christian Academy to educate the whole person under the authority of God's Word. We believe GCA can best achieve our mission by training young people spiritually, academically, socially, and physically. Gateway stands hand-in-hand with parents and the church in fulfilling this biblical mandate to train up children in the way they should go.

## DRESS CODE

In signing the application you are indicating that your children will adhere to the school dress code. The following list is intended to give you a general sense of Gateway's dress code. Please refer to the Student Handbook for specifics.

### Elementary and Middle School Classroom Dress Code

K3-8<sup>th</sup> grade students must wear uniforms obtained through Flynn and O'Hara Uniforms. A complete list of Gateway's uniform items may be found in the Student Handbook, on flynnohara.com, and at the Flynn O'Hara Uniforms store. Clothing should fit modestly. Shoes, accessories, and hair styles should be conservative and in good taste.

### High School Boys Classroom Dress Code

- Pants- Dress or Dockers-style casual pants with a belt should be worn. Jeans, sweats, and athletic pants are not permitted.
- Shirts- Shirts with a fold-down collar (dress or polo) should be worn and remain tucked in. Tee shirts and shirts with pictures/writing are not permitted.
- Shoes- Shoes and socks should be worn at all times. Ragged tennis shoes are not permitted.
- Hair- Hair should be neat, well-groomed, and not dyed any unnatural colors. Boys' hair should be short enough that it does not overlap the ears, eyebrows, or collar. Facial hair is not permitted.
- Accessories- Boys may not wear jewelry other than class rings and watches.

### High School Girls Classroom Dress Code

- Dresses/Skirts- Dresses or skirts that reach the middle of the knee may be worn.
- Pants- Dress or Dockers-style casual pants may be worn. Skinny-cut or slim-fit pants are not allowed. Jeans, sweats, and athletic pants are not permitted.

- Tops- Dresses and shirts should have a modest neckline and should reach the skirt or pants at all times. Tee shirts and shirts with pictures/writing are not permitted.
- Hair- Girls' hair is to be styled neatly, conservatively, and not dyed any unnatural colors.
- Accessories- Makeup and jewelry should be in good taste. Piercing jewelry is only permitted in the earlobes.

**General Athletic Dress Code**

- The specified P.E. shirt and shorts or pants should be worn during P.E. classes.
- Shorts worn during P.E. and athletic events should reach the knee.

**Extracurricular Activities Dress Code**

The dress code for all extra-curricular school activities is found in the student handbook and applies to all other school functions (programs, sporting events, field trips, etc.) whether on GCA's campus or elsewhere.

**STUDENT HANDBOOK**

All parents wishing to enroll their children in Gateway Christian Academy must read the Student Handbook, along with those children enrolling, and agree to abide by the policies stated. Please make special note of the Dress Code regulations and the Parking Lot regulations as you read the Handbook since these will impact your first day of school.

**STATEMENT OF COOPERATION**

**In signing the application, I attest that...**

1. The information provided in this document is accurate.
2. I understand that my child will be trained in accordance with the Statement of Faith and Mission Statement.
3. I give permission for my child/children to take part in school activities, including sports and school-sponsored trips away from the school premises. I agree to allow GCA to administer first aid and, if necessary, contact appropriate medical assistance and follow their direction. I also agree to relieve Gateway Church & Christian Academy, including its employees, from any liability in connection with these activities, actions, and instructions.
4. I will read and abide by the Student Handbook. Understanding that the teacher has full discretion in the classroom discipline of my child, I recognize that it is primarily my own God-given duty to administer appropriate discipline to my child.
5. The administration has full responsibility for placing my child in the proper grade.
6. Tuition is paid over a ten-month period and every family must be enrolled in the FACTS program or pay their tuition up front in full at the time of enrollment.
7. My cooperation is expected in: (a) Regular payment of tuition and fees; (b) Practical help; (c) Faithful prayer; (d) Support of school policies and procedures, and (e) Involvement in fund raisers.
8. The school reserves the right to dismiss any student who does not respect its spiritual standards or cooperate in the educational process. Should it become apparent that either the parents or the student(s) harbor attitudes contrary to the school's principles, standards, goals, or reflects an uncooperative attitude, the school reserves the right to dismiss the student or all students of said family.

\_\_\_\_\_ signature of parent or guardian \_\_\_\_\_ date

State below the reasons you wish for your child(ren) to attend Gateway Christian Academy:

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