

**Yr. of Baptism:**\_\_\_\_\_

**Birthdate:** \_\_\_\_\_

STUDENT'S NAME: \_\_\_\_\_ AGE: \_\_\_\_\_ GRADE: \_\_\_\_\_

First

## Middle

ADDRESS: \_\_\_\_\_

City

Zip Code

HOME PHONE: (    ) \_\_\_\_\_ EMERGENCY NUMBER (    ) \_\_\_\_\_

CELL PHONE: ( )

LIVING WITH: ☐ Father ☐ Mother ☐ Stepfather ☐ Stepmother  
☐ Other/Legal Guardian

NAME AND ADDRESS OF PERSON RESPONSIBLE FOR ACCOUNT:

First

## Middle

Street, P.O. Box, Apt. #

City

Zip Code

*Please indicate below any change in marital status, number of children, job (include new address and phone) etc., that has taken place during the current school year or is anticipated in the near future.*

Full Names of Parents/Guardians Student Lives With

## Church Membership

Signature

Date \_\_\_\_\_



# San Antonio Christian School

## Before and After School Care

After school care is available for those parents who are working or may need to run an errand before picking up their child/children from school.

FREE SUPERVISION is provided on campus as follows:

- Before School Care: 7:30 am to 8:00 am
- After School Care: Begins 15 minutes after school dismissal. Any student, regardless of grade level, who is not picked up by the time free supervision has ended, will be checked into After School Care and charged as follows:
  - 1<sup>st</sup> child - \$5.00
  - 2<sup>nd</sup> child - \$4.00
  - 3<sup>rd</sup> child - \$3.00
  - Additional child/children – Free
    - Late pick-up fee: \$1.00 for each minute after 5:00pm M-TH and 4:00pm Friday.
    - Sign-in and out: The person dropping off or picking up the student must sign the sign-in/out sheet daily
    - Charges subject to change every year

The providers will maintain the records. Charges will appear on the next monthly tuition statement. Check should be made payable to San Antonio Christian School. Questions should be directed to the school office (909) 982-2301.

**Children are expected to follow the rules of the school and the instructions given by the supervisor. Disregard for the rules, inappropriate behavior, behavior that endangers others or seriously impacts the program will be grounds for dismissal from the program.**

After School Care desired \_\_\_\_\_ Expected time of pick up \_\_\_\_\_

Student's Name \_\_\_\_\_  
Last Name First Name Grade

**Mother's Name** \_\_\_\_\_ **Cell #** \_\_\_\_\_

**Work #** \_\_\_\_\_ **Home #** \_\_\_\_\_

**Father's Name** \_\_\_\_\_ **Cell #** \_\_\_\_\_

**Work #** \_\_\_\_\_ **Home #** \_\_\_\_\_

**Emergency Contact Name** \_\_\_\_\_ **Cell #** \_\_\_\_\_

**Work #** \_\_\_\_\_ **Home #** \_\_\_\_\_

**Relationship** \_\_\_\_\_

### **Medical**

Child's Allergies (if any) \_\_\_\_\_

Medicines child is taking (if any) \_\_\_\_\_

Relevant Medical History \_\_\_\_\_

Print Parent/Guardian Name: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date \_\_\_\_\_



# San Antonio Christian School

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## Bullying Policy

SACS believes that all students have a right to a safe and healthy school environment. The school and community have an obligation to promote mutual respect, tolerance, and acceptance.

SACS will not tolerate behavior that infringes on the safety of any student. A student shall not intimidate, harass, or bully another student through words or actions. Such behavior includes: direct physical contact, such as hitting or shoving; verbal assaults, such as teasing or name-calling; and social isolation or manipulation.

SACS expects students and/or staff to immediately report incidents of bullying to the principal or designee. Staff who witnesses such acts take immediate steps to intervene when safe to do so. Each complaint of bullying should be promptly investigated. This policy applies to students on school grounds, while traveling to and from school or a school-sponsored activity.

Teachers should discuss this policy with their students in age-appropriate ways and should assure them that they need not endure any form of bullying. Students who bully are in violation of this policy and are subject to disciplinary action up to and including expulsion.

- Any student who engages in bullying may be subject to disciplinary action up to and including expulsion.
- Students are expected to immediately report incidents of bullying to the principal or designee.
- Students can rely on staff to promptly investigate each complaint of bullying in a thorough and confidential manner.
- If the complainant student or the parent of the student feels that appropriate resolution of the investigation or complaint has not been reached, the student or the parent of the student should contact the principal or the Office of Student Services. The school system prohibits retaliatory behavior against any complainant or any participant in complaint process.

**We have read and understand the BULLYING POLICY.**

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Student Name

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Student Signature

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Grade

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Date

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Parent/Guardian Name

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Parent/Guardian Signature

---

Date



# San Antonio Christian School

## Computer Acceptable Use Policy Agreement

Please complete and return the agreement below to the school office.  
Use of any computers or network services on SACS campus will be prohibited  
until this form is received.

**As a user of the SACS computer network, I have read and understand the terms and conditions of this agreement. I have accepted the terms.**

**Printed Name of User** \_\_\_\_\_

**User Role (Circle One):**      Student      Staff      Faculty      Administration

**Email Address** \_\_\_\_\_

**User Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**As a parent or legal guardian of the user signing above, I grant permission for this user to access computer services including network, Email, and Internet access. I understand that individuals and families may be held liable for any inappropriate behavior. I understand that some materials of the Internet may be objectionable, but I accept responsibility to work with the school guidance of Internet use-setting and conveying standards for the user to follow when selecting, sharing or exploring information and media.**

**Printed Name of Parent/Guardian** \_\_\_\_\_

**Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip Code** \_\_\_\_\_

**Home Phone** \_\_\_\_\_ **Work Phone** \_\_\_\_\_

**Email Address** \_\_\_\_\_

**Parent/Guardian Signature** \_\_\_\_\_

**As a student, staff, faculty or administrator of San Antonio Christian School, I grant permission to San Antonio Christian School to use my photo or school filmed activity on the SACS website, Alumni and Developmental publications, or any marketing materials.**

**Student Signature** \_\_\_\_\_

**Parent/Guardian Signature** \_\_\_\_\_

## Pacific Union Conference CONSENT TO TREATMENT

Only designated staff, such as the school nurse or physician, will have access to the completed form. This form will be stored in a locked file.

*This form must be filled out at the beginning of each school year to cover the activities for the school year. A copy of each student's form must be taken on off-campus activities.*

Student Name \_\_\_\_\_

Age \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Mo. Day Yr.

Address \_\_\_\_\_

Parent/Guardian's Name \_\_\_\_\_

Father/Guardian Business Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

Mother/Guardian Business Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

Please describe allergies to substances and medication. \_\_\_\_\_

If on regular medication, please specify. \_\_\_\_\_

Date of last tetanus shot \_\_\_\_\_

Please give the name of your local family physician(s) to be called in case your son or daughter becomes ill or has an accident at school and you cannot be reached.

1. Family Physician \_\_\_\_\_ Office Phone \_\_\_\_\_

Address \_\_\_\_\_

2. Family Physician \_\_\_\_\_ Office Phone \_\_\_\_\_

Address \_\_\_\_\_

Hospital Preference \_\_\_\_\_ Telephone \_\_\_\_\_

Please give the names of two relatives or friends who have consented to assume the responsibility of your son or daughter in case of illness or accident until you can be reached. In case of any changes in the named persons, notify the school in writing.

1. Name \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_

2. Name \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_

If emergency service involving medical action or treatment is required and neither the parent/guardian nor the family physician can be reached for consent, the parent/guardian hereby consents to the rendering of such emergency medical service for the above named student as shall be necessary in the medical opinion of the doctor rendering the service. This authorization is given pursuant to the local state Civil Code.

Signature of Parent or Guardian \_\_\_\_\_ Date \_\_\_\_\_



# San Antonio Christian School

## Emergency and Authorized Student Release

STUDENT NAME: \_\_\_\_\_

In the event that you cannot be reached please provide the names of three relatives or friends who have consented to assume responsibility of your child in case of illness, accident, or major disaster at San Antonio Christian School. Students will be released to the authorized individuals ONLY. There will be NO EXCEPTIONS.

INDIVIDUAL MUST BE 18 YEARS OR OLDER. PLEASE DO NOT LIST YOURSELF BELOW

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

a. Telephone \_\_\_\_\_ Cell \_\_\_\_\_

2. \_\_\_\_\_ Relationship \_\_\_\_\_

a. Telephone \_\_\_\_\_ Cell \_\_\_\_\_

3. \_\_\_\_\_ Relationship \_\_\_\_\_

a. Telephone \_\_\_\_\_ Cell \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_



# San Antonio Christian School

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## Field Trip T-Shirt Order Form

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

Size: *(Check one)*

Grade: \_\_\_\_\_

XS

S

M

L

XL

Payment Type: *(Check one)*

Cash

Check

Credit Card

Debit Card

Charge to Account

.....

**Office Use:**

Paid: \_\_\_\_\_

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

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





# San Antonio Christian School

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## Internet Safety

I, \_\_\_\_\_, agree that:  
(print student name)

**I will never give out private information**, such as my last name, my address, my telephone number, or my parents' work addresses or telephone numbers on the Internet.

**I will never give out the address or telephone number** of my school on the internet without first asking permission.

**I understand which sites I can visit** and which ones are off-limits.

**I will tell an adult right away** if something comes upon the screen that makes me feel uncomfortable.

**I will never agree to meet in person** with anyone I meet online.

**I will never e-mail a person any pictures** of myself or my classmates without an adult's permission.

**I will tell an adult** if I get a mean e-mail message from anyone.

**I will remember that going online** on the Internet is like going out in public, so all safety rules I already know apply here as well.

**I know the Internet is a useful tool** and I will always use it responsibly.

**I will follow these same rules when I am at home**, in school, at the library, or at a friend's home.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Grade

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date



# San Antonio Christian School

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## Personal Information and Photo Release

Privacy concerns make it necessary for the school to have your permission to release your name, address, phone number, and photo. This information may be contained in the student directory, yearbook, SACS Social Media, SACS Website, and newsletters.

Please place a check mark in front of all the information releases that you are okay with.

Thank you!

\_\_\_\_\_ Photo in yearbook and information about your child as we describe events that happened during the year such as "Autumn is most likely to succeed." (Directory information is not included in the yearbook.)

\_\_\_\_\_ Name, telephone number, and address in the school directory.

\_\_\_\_\_ Photos of your child and event information on social media and SACS website as well as in promotional flyers and/or DVDs. (This includes group pictures during class trips and special events.)

\_\_\_\_\_ Photos of your child on classroom and outside bulletin boards.

\_\_\_\_\_ Photos and event information about your child in newsletters.

I give permission for my child \_\_\_\_\_ and their private information that is checked to be included in the above publications.

Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_



# San Antonio Christian School

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## Playground Rules

### Outside Rules:

1. No running on sidewalks, or in the school rooms.
2. Throw only balls and other play equipment that is meant to be thrown (no sand, rocks, sticks, etc.). Don't throw balls at jungle gym (castle).
3. No jumping off, standing on or running out of the swings.
4. Swinging only back and forth, not side-to-side, and no twisting or doubling up.
5. Do not climb the trees or break limbs off them.
6. If you dig a hole in the sand, fill it back up before you leave it.
7. Keep play safe and fun. No hitting or pulling/pushing on other people. All games must be non-contact except for tag type of games.
8. Any eating of food outside is to be at the tables only. When finished, clean the table where ate and pick up the trash. Put lunch pails in designated area.
9. No standing on tables or benches; also no sitting on top of tables.
10. No pretend violence (shooting or stabbing).
11. Shoes must be worn on the playground at all times.
12. No electrical device of any kind is to be used, except on designated days.
13. Everyone may stay in the area specified by the care giver.
14. Ask caregiver before going inside school rooms.
15. No climbing on slides.
16. Only one person going down the slide at a time.
17. No hanging upside down on monkey bars.
18. No lifting other students.
19. When you hear the whistle, stop, look, and listen.
20. No swinging jump ropes around (including helicopter).
21. If you see someone that needs help, notify care giver.

### Inside Rules:

1. No throwing balls (including games like keep away, dodgeball, etc.).
2. No building forts out of chairs, only use blocks.
3. No using play equipment as weapons.
4. No running.
5. Keep hands and body parts to yourselves.
6. Use inside voice (no yelling or screaming).
7. Don't touch non-play items.

**We have read and understand the outside/inside rules.**

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Parent/Guardian Signature

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Student Signature

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Date



# San Antonio Christian School

## School Commitment Form

### **Mission Statement**

Within an environment conducive to learning, San Antonio Christian School strives to provide a Christ-centered multi-faceted education to lead children into a personal relationship with Christ, and guide and motivate students to be successful in all their endeavors.

### **Philosophy**

Seventh-day Adventist education is dedicated to the fulfillment of one great purpose in cooperation with divine agencies; "to restore in man the image of his Maker, to bring him back to the perfection in which he was created, to promote the development of body, mind, and soul, that the divine purpose of his creation might be realized," (*Education*; (White, pp. 15, 16)

In the beginning man was created in the image of God, "endowed with a power akin to that of the Creator- individuality, power to think and to do," (*Education*; (White, p. 17), designed to enjoy endless development of every faculty through which he would more fully reflect the glory of the Creator. However, since his fall, man's capacity for free, creative, responsible thinking and acting has been considerably compromised. The purpose of Christian education is to restore that image of God in each student. Of prime importance throughout the total school experience is to know God, to know His plan for our redemption and to know the kind of person each may become as s/he is restored to His likeness. Such a transforming restoration involves the development of the whole person, spiritually, physically, mentally, socially, emotionally, and vocationally.

### **Student Pledge**

As a student of San Antonio Christian School, I recognize that every reasonable effort will be made to stimulate and inspire me to develop my unique potential. I pledge to support the administration's effort to provide a positive, safe and orderly environment by first, promising to read, become familiar with, and follow the policies outlined in the *Student Handbook*, and secondly, by choosing to be a student who, both on and off campus:

- ❖ Seeks to develop physical, mental, and spiritual energies to serve and honor God.
- ❖ Respects and protects the rights of all people.
- ❖ Practices principles of honesty, integrity and morality.
- ❖ Refuses to use or support the use of tobacco, alcohol or illegal drugs.
- ❖ Endeavors to influence and assist fellow students in supporting these ideals.

\_\_\_\_\_  
*Student Name (printed)*

\_\_\_\_\_  
*Student Signature*

\_\_\_\_\_  
*Date*

### **Parent Pledge**

As a parent of a student at San Antonio Christian School, I pledge to support the administration's efforts to provide a positive, safe, and orderly learning environment by assisting my child in keeping the San Antonio Christian School Commitment.

\_\_\_\_\_  
*Parent/ Guardian Name (printed)*

\_\_\_\_\_  
*Parent/ Guardian Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Parent/ Guardian Name (printed)*

\_\_\_\_\_  
*Parent/ Guardian Signature*

\_\_\_\_\_  
*Date*