

Covington Christian School  
 "Where Children Learn Truth"  
 Returning Student Registration Form

Student Name:	Entering Grade:
• For K4, K5 (circle one)    Full Day                      Half Day	

**Parent/Guardian Information**

Father:		Mother:	
Father Phone:		Mother Phone:	
Father Work Phone:		Mother Work Phone:	
Father Email:		Mother Email:	
Home Address:			
City:	State:	Zip:	

**Emergency Contact Information**

Name/Relationship to Student	Phone Number

**Financial Information**

Preferred Payment Method:	<input type="checkbox"/> One Payment <input type="checkbox"/> Two Payments <input type="checkbox"/> 10 Monthly Payments <input type="checkbox"/> Other _____
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Are you applying for any of the following scholarships? <i>Please note: you must submit your most recently filed IRS 1040 Form if you are applying for tuition assistance.</i>	<input type="checkbox"/> Choice Scholarship <input type="checkbox"/> Scholarship Granting Organization (SGO) <input type="checkbox"/> CCS Scholarship
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Submit completed application and accompanying documents to:  
 Covington Christian School  
 PO Box 267  
 Covington, IN 47932

<b>Office Use Only:</b>	
<input type="checkbox"/> Registration Fees Paid _____	<input type="checkbox"/> Proof of Income Forms _____
<input type="checkbox"/> Book Fees Paid _____	<input type="checkbox"/> Immunization Records _____

*Covington Christian School admits students of any race, color, national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national and ethnic origin in administration of its educational policies, admissions policies, scholarship and loan programs, and athletic and other school-administered programs.*



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

Covington Christian School  
"Where Children Learn Truth"  
Parent Permission Form

Covington Christian School has my permission to do the following:

**Medical**

Please give my child ibuprofen, Tylenol, or Benadryl (appropriate dose for age) as needed. Medications given will be recorded in a medication log.	<input type="checkbox"/> Yes <input type="checkbox"/> No
My child is NOT allergic to the above mentioned medications.	Initials _____

If your child is to receive medications on a daily basis, please list the medication and dose.

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Please list any known allergies for your student:

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**Food/Beverage**

I give permission for my child to partake in food/drinks brought in by other students/parents throughout the year.	<input type="checkbox"/> Yes <input type="checkbox"/> No
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**Media**

CCS teachers often take pictures of your child throughout the year. These pictures may be published in a newspaper article, a school publication, or on social media. Note: When posting pictures to social media, the child's name will not be given. We do, however, tag the parents.

CCS Staff members may use pictures of my child taken during the school day or during school events to publish in newspaper articles, social media, or in school advertisements and publications. I understand that student names will not be used on social media, however, parents will be tagged.	<input type="checkbox"/> Yes <input type="checkbox"/> No
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Comments or special notes from parent:

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**Pick-Up**

Person(s) authorized to pick up my child from school:

Name/Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Name/Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

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



**Covington Christian School**  
 "Where Children Learn Truth"  
 2024/2025 Tuition and Fee Schedule

**Tuition (shown in annual amounts)**

<b>K5-2nd Grade</b>	\$5,835.00
<b>K4</b> (Five full or five half days)	\$4,835.00
<b>K3</b> (Five full or five half days)	\$4,835.00
<b>K3</b> (Three full or three half days)	\$4,835.00

**Annual Fees (per student)**

Registration Fee (due at time of registration, non refundable)	\$150.00
Book Fee (due at time of registration)	\$250.00

**Other Fees (where applicable)**

Aftercare (3:30 PM to no later than 5:30 PM)	\$10.00 each occurrence
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**Discounts**

- \* 5% off total tuition for a full, one-time tuition payment on/or before August 1. (Does not include registration/book fees).
- \* 10% pastoral discount (Employment must be verified; does not include registration/book fees).

**Payment Plans**

- \* Indiana Choice Scholarship (paid directly by the state of Indiana).
- \* Pay in full on/or before August 1 (Receive 5% discount).
- \* 10 or 12 month payment plan.
- \* Pay 50% of tuition on/before August 1 and pay remaining balance on/or before January 1.
- \* Other payment arrangements may be considered by contacting the school office.