



Omak Christian School  
102A Tower St.  
Riverside, WA 98841

*Elementary Re-Enrollment*

## Re-Enrollment Application: Elementary

Please complete this form in its entirety. Please use black or blue ink. All forms can be submitted to our office at **102A Tower St. Riverside, WA 98849**, Tuesdays - Thursdays, mailed to the same address or emailed to **admissions@omakchristian.org**. Please submit your applications in a timely manner as applications will be reviewed and accepted on a first-come, first-served basis.

Student Name (last, first middle) \_\_\_\_\_

Preferred name: \_\_\_\_\_ Enrollment Year: \_\_\_\_\_ Age: \_\_\_\_\_

DOB: \_\_\_\_\_ Gender:  Male  Female Grade at time of enrollment: \_\_\_\_\_

### Parental Information

**Mother/Guardian:** \_\_\_\_\_ Phone #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Are you employed?  Yes  No Employer \_\_\_\_\_ Work#: \_\_\_\_\_

Best way to contact you:  Cell  Work  Texting  Calling

**Father/Guardian:** \_\_\_\_\_ Phone #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Are you employed?  Yes  No Employer \_\_\_\_\_ Work#: \_\_\_\_\_

Best way to contact you:  Cell  Work  Texting  Calling

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

Mailing Address: \_\_\_\_\_

Is there a second parent mailing address?  Yes  No

## HOME CHURCH INFORMATION

Church Name: \_\_\_\_\_  We do not attend church

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

Pastor's Name: \_\_\_\_\_ Church Phone#: \_\_\_\_\_

Pastor's Email: \_\_\_\_\_ How Long have you attended? \_\_\_\_\_

How frequently do you attend?  Weekly  Bi-weekly  Monthly  Yearly/Occasionally

May we contact your church?:  Yes  No

## STUDENT BEHAVIOR/PERSONALITY TRAIT

*Please answer the following questions with as much detail/clarification as possible.*

When my child has free time, he/she will:

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Please describe how your child interacts with others:

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Briefly describe your child's overall personality:

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## ACADEMIC GOALS AND PREFERENCES

*Please indicate on a scale of 1-5 (1 being least interested and 5 being most interested), your child's interest/enjoyment of the following classroom subjects*

Bible: 1 2 3 4 5

Spelling/Phonics: 1 2 3 4 5

Reading/Literature: 1 2 3 4 5

Grammar: 1 2 3 4 5

Writing: 1 2 3 4 5

Math: 1 2 3 4 5

Science: 1 2 3 4 5

History: 1 2 3 4 5

*Strengths: Please describe your child's academic strengths.*

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*Weaknesses: Please describe your child's academic needs.*

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*Goals: Please describe your child's academic goals for the year.*

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## CONFIDENTIAL INFORMATION

Are there custody issues we should be aware of?  Yes  No

Are there custody papers on file?  Yes  No

Is there a restraining order or any additional court/law orders in place?  Yes  No

*If yes, please attach a copy of the order to the application, or be prepared to bring a copy of the order upon approved enrollment.*

Is there a second parent mailing address?  Yes  No

Secondary mailing Address: \_\_\_\_\_

(If applicable, please include the name of the resident)

Do you want to be listed in our Parent Directory?  Yes  No

Should both names and addresses be listed in our Parent Directory?  Yes  No

(If No, please indicate which parent/guardian you would like to be listed in the Parent Directory: \_\_\_\_\_)

Anything not stated above that we should know about your child that will allow us to guard his/her heart? \_\_\_\_\_

## HEALTH INFORMATION

Health of Student:  Good  Fair  Poor

Please explain \_\_\_\_\_

Does your child have any allergies?  Yes  No

Please list \_\_\_\_\_

Is your child on special medications?  Yes  No

What medications? \_\_\_\_\_

Does your child have any special health needs?  Yes  No

Please explain: \_\_\_\_\_

Child's Physician: \_\_\_\_\_

Office Name: \_\_\_\_\_ Office Number: \_\_\_\_\_

Insurance Provider: \_\_\_\_\_ Policy Number: \_\_\_\_\_

\*Please provide a copy of your child's insurance card

In case of emergency, I hereby authorize and request that OCS personnel administer medical treatment as deemed necessary until my child can be safely transported to a doctor or hospital for medical treatment. I hereby authorize OCS personnel to release medical information as needed to help in my child's care when I am not able to provide it myself. I understand that temporary emergency measures may be necessary and I do hereby give permission for medical, surgical, diagnostic, and hospital procedures as may be performed or prescribed by a physician as a safeguard for my health when it is not advisable to take the time to contact my emergency contact person(s). I release Omak Christian School from all liabilities that may occur in such an incident.

I agree with the above statement       I disagree with the above statement

## FRIENDS AND FAMILY

Other than the parent/guardian, who can pick up your child? Please list below:

\*Your child will NOT be released with anyone unless they are previously listed on this form. If your preferences have changed and you would like to remove or add someone to your list, please let the front office know.

Friend/Family Name: \_\_\_\_\_ Phone \_\_\_\_\_

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

Relationship to your child: \_\_\_\_\_

Friend/Family Name: \_\_\_\_\_ Phone \_\_\_\_\_

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

Relationship to your child: \_\_\_\_\_

Friend/Family Name: \_\_\_\_\_ Phone \_\_\_\_\_

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

Relationship to your child: \_\_\_\_\_

# ENROLLMENT AGREEMENT

I, the undersigned parent or guardian of \_\_\_\_\_, understand that completion of the Omak Christian School Elementary Enrollment Form does not guarantee my child's enrollment in the **2023/2024 school year**. I have reviewed the Omak Christian School Handbook or Application Process and fully comprehend the terms and processes.

I understand that in order for my child to be considered for enrollment, I have agreed to the terms as follows:

- A. The family must agree to OCS's statement of faith.
- B. The student must desire to attend Omak Christian School.
- C. The student must strive to learn with a grateful heart and attitude, honoring Jesus Christ.
- D. The student must aim to daily be an image-bearer of Christ including the following:
  - a. Being honest
  - b. Being kind
  - c. Treating others with respect
  - d. Working to bring glory to God
- E. Students understand that they are to demonstrate an attitude of submission and support to OCS's mission and to be a positive influence on other students in pursuing OCS's mission.
- F. Students must understand, that their annual enrollment is based on their satisfactory academic status and compliance with the rules and regulations of OCS.
- G. The family must support OCS' position on the biblical definition of marriage as defined by God, between one man and one woman.

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Parent/Guardian Signature

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Date

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Parent/Guardian Signature

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Date

# Omak Christian School Statement of Faith

## **We Believe:**

1. There is one true God eternally existing in three persons; the Father, the Son, and the Holy Spirit.
2. The deity of our Lord Jesus Christ, His virgin birth, in His sinless life, in His miracles, in His vicarious and atoning death, through His shed blood, in His bodily resurrection, in His ascension to the right hand of the Father, and His personal return to power and glory.
3. For the salvation of the lost and sinful man, regeneration by the Holy Spirit is essential.
4. The present ministry of the Holy Spirit and the Baptism as described in 1 Corinthians.
5. The resurrection of both the saved and the lost. They that are saved, to the resurrection of life, and they that are lost, to the resurrection of damnation.
6. The Bible to be the inspired, the only infallible authoritative, word of God. The Omak Christian School's Board of Regents is the ultimate interpretation in regards to discipline, doctrine, policies, and practices.
7. Gender as defined by Genesis 1:27, "So God created mankind in his own image, in the image of God he created them; male and female he created them."
8. Marriage is between a man and a woman in accordance with Genesis 2:21-24.

**Matthew 19:4-5** ESV / 26 He answered, "Have you not read that he who created them from the beginning made them male and female, and said, 'Therefore a man shall leave his father and his mother and hold fast to his wife, and the two shall become one flesh?'

# Elementary Enrollment Next Steps

1. Turn in your completed application and completed tuition forms via email at [admissions@omakchristian.org](mailto:admissions@omakchristian.org), or by mail:

**102A Tower St. Suite A, Riverside, WA 98849.**

2. OCS Administration will contact you within 15 business days regarding the status of your enrollment application.
3. Upon application approval, your enrollment fee\*\* (\$100), and book fees must be paid in full within 10 business days.
4. Upon application renewal, your family will also receive a welcome packet via email, including all additional paperwork needed to complete your enrollment.
5. Complete and turn in your child's immunization record/the opt-out form, the medical form, and any additional paperwork included in your welcome packet.  
***This must occur before your student(s) can officially enter their classroom.***

\* All Fees must be received via check, written out to Omak Christian School