Dear Parent(s),

Thank you for your interest concerning admission to Memorial Day School. It is obvious that you are a discerning parent who places the education of your child as a top priority. We, at Memorial, understand the importance of making an informed decision. As you have shown an interest in Memorial Day School it is our mission to provide you with all of the necessary information and support that you will need to complete the application and enrollment process. To assist you in beginning this process, we would like to invite you and your child to tour our campus and meet our faculty and staff.

**PRE-K**
1. Your child must be four (4) years old for Pre-K before August 1st.
2. Submit a completed Application for Enrollment and the non-refundable Application Fee of $200.00.
3. Medical Information: A current certificate of immunization and a current eye, ear, and dental certificate, obtainable from the Chatham County Health Department.
4. Your child must take an Admissions Test to be set up with the Director of Admissions.
5. Personal interview with student and parent(s).

**Kindergarten-12th Grade**
1. Your child must be five (5) years old on or before August 1st.
2. Submit a completed Application for Enrollment and the non-refundable Application / Testing Fee of $150.00.
3. Transcripts and School Records: Current transcripts showing final grades from last year and current grades from this school year are required along with standard achievement test scores. Also required are a current immunization certificate and an eye, ear and dental certificate from either the Health Department or your physician. We also require a discipline report from your current school. **Enclosed you will find a Records Release form to be completed, signed and returned with your enrollment application.** In order to expedite the admissions process we ask that you bring with you to the first interview an unofficial copy of the following documents: current transcript, discipline record or record of no discipline issues, immunization records, current test scores or any Special Education records.
4. Admission Testing: Appointments will be scheduled as soon as possible. You may expect a decision regarding admission within two weeks after testing.

Your application for admission will be reviewed and evaluated when all required records, documentation, and fees have been received. If you should have questions at any point in the process, you are encouraged to contact the school at 912-352-4535 or e-mail Mrs. Jamie Lane, Director of Admissions, at jlane@memday.org.

We look forward to hearing from you.

Sincerely,

Jamie A. Lane
Director of Admissions
NEW STUDENT APPLICATION

Application must be completely filled out and signed to be processed.
$150.00 Application Fee must be submitted with application.

STUDENT INFORMATION: Please register the following student:

Last Name  First Name  Middle Name  Goes by  Date of Application

Street Address

City  State  Zip Code  Home Phone  Student Cell Phone

Student Email Address:

Grade Applying For  Academic Year  Student's Social Security Number  Male/Female

PARENT OR GUARDIAN INFORMATION: (Married, Divorced, Separated, Widowed)

If parents are separated or divorced, who has legal custody?
I agree to provide the school with a copy of any current legal documents showing custodianship.

Please circle one:
FATHER / STEP-FATHER / MALE GUARDIAN:
NAME
Social Security #
Address
City, State, Zip
Home Phone  Pager/Cell Phone
Email Address
Employer  Position or Title
Address
City, State, Zip
Business Phone

MOTHER / STEP-MOTHER / FEMALE GUARDIAN:
NAME
Social Security #
Address
City, State, Zip
Home Phone  Pager/Cell Phone
Email Address
Employer  Position or Title
Address
City, State, Zip
Business Phone

OTHER PARENT (Optional)
Address
City, State, Zip

OTHER PARENT (Optional)
Address
City, State, Zip
EMERGENCY CONTACTS: If I / We cannot be reached, I / We give permission for the following named person to pick up our child(ren) from school and to make decisions regarding our child(ren)’s health and well-being.

Name ________________________ Relation ________________________ Phone ________________________
Physician’s Name ________________________ Phone ________________________

1. Is there a medical condition, physical or mental handicap, mental or nervous condition, learning disability or attention deficit disorder of which the school should be aware? Yes ______ No ______
   (Optional: Please complete the “Voluntary Declaration of Disability Form” if applicable. Form is available upon request from the school admissions office.) If so, please describe the condition and list any medications the child is currently taking. ________________________

2. Does your child have any known allergies (ex: food allergies, insect bites, medicines, etc.)? Yes______ No______
   Please explain: ________________________

DISCIPLINE RECORD:
1. Has your child ever been adjudicated through the court system? Yes______ No______ Pending______
2. Has your child ever been charged with:
   A misdemeanor? Yes______ No______ Found Guilty? Yes______ No______
   A felony? Yes______ No______ Found Guilty? Yes______ No______
3. Has your child ever been suspended or expelled from another school? Yes______ No______
4. Is your child currently under suspension or expulsion from any other school? Yes______ No______

PERMISSIONS:
I agree that my child(ren) may participate in school sponsored field trips. Yes______ No______
I agree that my child(ren) may participate in interscholastic or intramural athletic programs. Yes______ No______
I agree that my child(ren) may be photographed in conjunction with the school’s activities
   And/or advertising campaigns. Yes______ No______
If a parent or guardian cannot be reached in case of accident or illness requiring immediate
   attention, I grant permission for the school to summon emergency medical services
   and to obtain hospital treatment. Yes______ No______
   I understand that the above permissions are granted assuming they are exercised in accordance with school regulations. I also agree on behalf of myself and my child to release and hold harmless, the school, its agents and employees, from all claims, damages, or other liabilities which are not the result of gross negligence by this school, its agents, or employees. I also agree to indemnify the school for all damages incurred and/or caused by my child.

Parent/Guardian Signature: ________________________

GRANDPARENT INFORMATION: So that we can include your child’s grandparents in our Grandparents’ Club, invite them to various school activities, and keep them informed, please list their names and addresses.

PATERNAL GRANDPARENTS
Names: ________________________
Address: ________________________
City, State, Zip: ________________________
Occupations: ________________________
Phone: ________________________

MATERNAL GRANDPARENTS
Names: ________________________
Address: ________________________
City, State, Zip: ________________________
Occupations: ________________________
Phone: ________________________
EDUCATION:
1. Please list all schools, including summer sessions, student has attended.

<table>
<thead>
<tr>
<th>Name of School</th>
<th>Location (City, State, Zip)</th>
<th>Grades Attended</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2. For students entering grades 6 – 12, tell us what you like best about your present school and what you do not like. ______________

3. Briefly list any scholastic distinctions or honors achieved. ______________

4. Has student ever repeated a grade? __________ If yes, please explain ______________

EXTRACURRICULAR AND PERSONAL ACTIVITIES:
Please list principal extracurricular, community and family activities, and hobbies in order of interest to student. Include specific events and/or major accomplishments such as musical instruments played, varsity letters earned, etc.

RECOMMENDATIONS:
1. How did you hear about Memorial? ______________

2. Have you or any members of your family ever attended Memorial? ____________ If yes, please give dates of attendance, names, and relationship to student. ______________

3. Name of person who recommended Memorial to you. ______________

4. Names of students you know who are currently attending Memorial. ______________

STUDENT NARRATIVE:
Why do you want to attend Memorial? ______________

PAGE 3 OF 4
TERMS OF ENROLLMENT
Memorial Day School, a PK-12 college preparatory school based on Christian values, operates under a non-discriminatory policy whereby each child is accepted on his/her own merit without regard to race, color, gender, and national or ethnic origin. Acceptance to Memorial Day School is dependent upon testing results, records, evaluation, parent conference and subsequent placement. The school reserves the right to refuse admission to any applicant who, in the opinion of the administration, will not benefit from the total program offered. 

I UNDERSTAND THAT MY OBLIGATION TO PAY THE FEES FOR THE FULL ACADEMIC YEAR IS UNCONDITIONAL AND THAT ON THE 15TH DAY OF SCHOOL THEREAFTER NO PORTION OF FEES PAID OR OUTSTANDING WILL BE REFUNDED OR CANCELLED IN THE EVENT OF ABSENCE, WITHDRAWAL OR DISMISSAL OF THE ABOVE STUDENT FROM THE SCHOOL.

SIGNATURE OF PARENT OR GUARDIAN ___________________________ DATE ___________________________

CONDUCT PLEDGE:
The student and the student’s parents/guardians agree to read the Parent/Student Handbook (please refer to student handbook at www.memorialdayschool.com) and abide by the school’s policies, rules, and regulations, as may be adopted or amended from time to time. The student may be suspended or dismissed from school at any time, if, in the opinion of the school’s administration, (1) the student’s academic progress is unsatisfactory; (2) the student’s conduct at school or away therefore is unsatisfactory or is detrimental to good order and discipline in the school; or (3) the student and/or the student’s parents/guardians fail to abide by the school’s policies, rules, and regulations or otherwise seriously interfere with the school’s accomplishment of its educational purpose. The acceptance of the student for enrollment in any school year shall not obligate the school to accept the student in any succeeding year.

Part of Memorial Day School’s commitment to safeguarding the health of its students and providing a safe place for its students to learn and grow, is its decision that the school shall be free of illegal drugs and alcohol. Because substance abuse, either while at school or away from school, can seriously endanger the health and safety of students and render it impossible to create a conducive environment for learning, Memorial Day School has established a Drug-Free School program to detect users and to remove abusers of alcohol, drugs or other controlled substances. Memorial Day School is committed to preventing the use and/or presence of these substances in its school or on its property and to encouraging its students to say "no" to drugs and alcohol.

Memorial Day School will utilize mandatory drug and alcohol testing which will be applicable to all students enrolled in the seventh through twelve grades. Memorial Day School reserves the right to drug and/or alcohol test these students at any time, for any reason.

We agree to support and participate in the drug/alcohol testing program and consent to the testing of my child under the program.

SIGNATURE OF APPLICANT ___________________________
SIGNATURE OF PARENT OR GUARDIAN ___________________________

I HAVE READ AND AGREE TO ALL THE TERMS OF THIS ENROLLMENT APPLICATION. My signature below indicates that all the information contained in this application is factually correct and honestly presented.

SIGNATURE OF PARENT OR GUARDIAN ___________________________ DATE ___________________________
SIGNATURE OF PARENT OR GUARDIAN ___________________________ DATE ___________________________

Memorial Day School admits students of any race, color, and national or ethnic origin.
# Tuition and Fees

## New Students – Application / Testing Fee

**Non-Refundable and Due with Application**

- **NEW STUDENTS**
  - Application / Testing Fee: $150.00

## New and Returning Students

<table>
<thead>
<tr>
<th>Grade</th>
<th>Kindergarten</th>
<th>1st-5th</th>
<th>6th-8th</th>
<th>9th-12th</th>
</tr>
</thead>
<tbody>
<tr>
<td>Registration Fee</td>
<td>$200.00</td>
<td>$200.00</td>
<td>$200.00</td>
<td>$200.00</td>
</tr>
<tr>
<td>(Per-Student Non-Refundable)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tuition</td>
<td>$6,800.00</td>
<td>$6,900.00</td>
<td>$7,500.00</td>
<td>$7,950.00</td>
</tr>
<tr>
<td>Capital Improvement</td>
<td>$500.00</td>
<td>$500.00</td>
<td>$500.00</td>
<td>$500.00</td>
</tr>
<tr>
<td>TOTAL COST</td>
<td>$7,500.00</td>
<td>$7,600.00</td>
<td>$8,200.00</td>
<td>$8,650.00</td>
</tr>
<tr>
<td>Junior / Senior Class Dues:</td>
<td>$200.00</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Junior / Senior Class Total Cost:</td>
<td>$8,850.00</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Payment Options 2 or 3:

- **Tuition Credit Plan**: $250.00 for each additional student

6th to 12th grade students are required to purchase their own textbooks.

**Multi-Child Discount:** $100.00 for 2nd Student; $200.00 for 3rd and 4th Student

## Tuition Payment Options

There are three options for tuition payment:

1. One payment of full tuition due May 1, 2019
   - A discount of $400.00 will be offered if all fees and Tuition are paid in full by May 1, 2019

2. Two payments: 1st payment due May 1, 2019, 2nd payment due December 1, 2019

3. Monthly payments through FACTS Management program and will be handled through the school Business Office

**A Tuition Credit Plan fee of $250.00 is required for payment option 2 or 3**

### Late Fee

- $300.00 Late Fee will be assessed for any returning student if not enrolled by May 1, 2019
- $400.00 if not enrolled by June 14, 2019 and $500.00 if not enrolled by July 1, 2019

There will be a fee of $50.00 for any and all returned checks.

---

*Memorial Day School admits students of any race, color, and national or ethnic origin.*
At Memorial Day School, we understand that your decision to enroll your child here is an important financial commitment. We also know that unfortunately, unforeseen circumstances sometimes arise which would cause your child to miss a portion of the school year. Our Tuition Credit Plan is being offered to help offset your financial loss in this situation.

As stated in the Enrollment Contract, students are enrolled for the full academic year and no adjustment of fees can be made by the School for absences, withdrawal or dismissal for any reason. The person financially responsible assumes the obligation to pay the tuition for the full school year subject to the terms of this Plan. This requirement is necessary as the School has continuing expenses such as maintenance and faculty salaries. In order to plan and maintain these services for the year, it is essential that annual tuition fees should be received.

What is covered:
In the event your child withdraws from the School, you will receive a credit of 60% of the unused portion of the year’s net tuition. The reasons for withdrawal covered by this plan include medical withdrawal, dismissal, and voluntary withdrawal from the School. Please note the following EXCLUSIONS: the Plan will not cover voluntary withdrawals from the School which result from actions of disciplinary, accidental or criminal nature within or outside the School against other students or adults.

Annual Cost:
The annual non-refundable cost to enroll in this plan is $250.00 per student per year and must be paid at the time of registration.

Who is covered?
Any parent choosing a payment plan other than an annual payment will automatically be enrolled in the Tuition Credit Plan. If you elect to pay annually the plan is optional.

Attendance requirement:
In the case of a voluntary withdrawal, a student must be in attendance for at least 14 calendar days (beginning the first day of academic classes) in order to be eligible for a credit.

Formula for calculating benefits:
The formula for calculation of the credit is as follows: The school year is divided into 9 week “quarters”.

For purposes of calculating a credit under this plan, if a student is enrolled on the first day of a quarter, he or she will be considered to be in attendance for the full quarter. In other words, after the first day of the quarter, no credit will be given for that particular quarter. For the 2018-2019 school year those dates are:

1st Quarter: August 5, 2019
2nd Quarter: October 14, 2019
3rd Quarter: January 7, 2020
4th Quarter: March 23, 2020

What happens to the benefit?
After the full year’s tuition due and owing has been posted, any benefit amount will be applied to the student’s account. Any amount still due on the account will be billed to the parent and payment will be expected upon receipt of the statement. No grades, transcripts, or diplomas will be released until account is paid in full.
Any remaining credit balance on the student’s account after all fees and charges have been posted will be refunded to the parent by check.

Memorial Day School admits students of any race, color, and national or ethnic origin.
PARENT CONTRACT AND PLEDGE OF SUPPORT
TO
MEMORIAL DAY SCHOOL

Memorial Day School is committed to providing the most effective educational experience for each student. In order to successfully fulfill this commitment, it is critical that the school and the parent(s) work as a team. It is for this reason that the school asks that the parent(s) to support the school’s effort by agreeing to the following:

- Agree to support the stated mission of Memorial Day School.
- Agree to discuss with the student the Memorial Day School code of conduct and stress the importance of maintaining appropriate behavior while at school and school-related activities.
- Agree to pay all fees and tuition by the due date.
- Agree to maintain accurate and up-to-date information in the student’s school files (i.e. address, telephone numbers, e-mail address, immunization and medical).
- Agree to accept the authority of the school’s teachers and administrators.
- Agree to make certain their student is prepared for school each day by having students complete all academic assignments, study each day and focus on academic progress and achievement.
- Agree to attend school Parent-School Association meetings and provide support to school fund drives and initiatives.
- Agree to support all policies stated in the Memorial Day School Student Handbook, especially those pertaining to student attendance, discipline, and dress code.
- Agree to attend all requested school conferences regarding student academic performance, attendance and/or discipline.

___________________________________________
Student’s Name

___________________________________________  __________________________
Father’s or Legal Guardian Signature       Date       Mother’s or Legal Guardian Signature       Date

Memorial Day School admits students of any race, color, and national or ethnic origin.

6500 HABERSHAM STREET <> SAVANNAH, GEORGIA 31405 <> 912.352.4535 <> FAX 912.352.4536
www.memorialdayschool.com
School Name: ________________________________________________

Address: __________________________________________________

City: __________________________ State: _______ Zip: __________

The student named below has applied for admission to Memorial Day School. Please forward the records requested below.

Student’s Name: ____________________________________________

Last               First               Middle

Date of Birth: ____________________________________________ Grade Last Attended __________

Month/Day/Year

____1) Standard Transcript (Grades, Normal Achievement Testing, Attendance, Activities)

____2) Discipline History (if no Discipline History please state NONE) MUST HAVE

____3) Special Testing Reports

____4) Medical & Health Records (Immunization Certificate, EED Certificate)

____5) Other: Any IEP, special education records, or psychological testing if applicable.

Pursuant to the Family Educational Rights and Privacy Act (20 USC § 1232 (g)) and provisions of Georgia law, as the parent or legal guardian of the above named student, I request and authorize the specific records requested above to be forwarded to the following address:

Memorial Day School, 6500 Habersham Street, Savannah, Georgia 31405-5946
Phone: 912-352-4535
Email records to Jamie Lane at jalane@memday.org

PARENT/GUARDIAN SIGNATURE ____________________ DATE ________________

Memorial Day School admits students of any race, color, and national or ethnic origin.