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
Pre-K Enrollment Procedures

1. Your child must be four (4) years old before August 1st and completely potty trained.
2. Submit a completed Application for Enrollment and the Registration Fee of $200.00. Students will not be accepted or will be dismissed when false information is given on an application.
3. Medical Information: A current certificate of immunization obtainable from the Chatham County Health Department and Birth Certificate.
4. Personal interview with student and parent(s).

Memorial Day School admits students of any race, color, and national or ethnic origin.
PRE-K STUDENT APPLICATION FOR ADMISSION
Application must be completely filled out and signed to be processed.

Registration Fee of $200.00 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       Cell Phone

Date of Birth

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  (    )  -  _______  Cell Phone  (    )  -  _______

Email Address

Employer

Position or Title

Address

City, State, Zip

Business Phone

Address

City, State, Zip

PREVIOUS SCHOOL or DAYCARE ATTENDED:

NAME: _________________________________________________________  ATTENDED FROM ___/___/____ TO ___/___/____

NAME: _________________________________________________________  ATTENDED FROM ___/___/____ TO ___/___/____

Page 1 of 3

6500 HABERSHAM STREET <> SAVANNAH, GEORGIA 31405 <> 912.352.4535 <> FAX 912.352.4536
www.memorialdayschool.com
EMERGENCY CONTACTS: If parents cannot be reached, to what relative or friend do I give permission to pick up my child from school and or make decisions regarding my child’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: __________________________

3. Does your child receive any services from an outside source (i.e.: Babies Can’t Wait)? If so, what: __________________________

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 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: __________________________

Student Name: __________________________

MATERNAL GRANDPARENTS

Names: __________________________ Address: __________________________

City, State, Zip: __________________________ Occupations: __________________________

Phone: __________________________
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. _____________________________________________  

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 handbooks 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.

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

Student Name

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

Page 3 of 3

6500 HABERSHAM STREET <> SAVANNAH, GEORGIA 31405 <> 912.352.4535 <> FAX 912.352.4536 www.memorialdayschool.com
CHILD’S NAME: ________________________________

REGISTRATION FEE: (Non-Refundable) $200.00 (Due at Registration)

SUPPLY FEE: $100.00 (Due at Registration)

Capital Improvement $250.00 (Due at Registration)

RETURNING MEMORIAL DAY SCHOOL STUDENT TUITION: $155.00 per week

NEW STUDENT TUITION: $175.00 per week

This tuition fee covers your child from 8:00 am until 2:45 pm for school followed with care from our After School program from 2:45 pm until 6:00 pm during the school schedule (See School Calendar). Before school care is available for $60.00 per month through our After School program. Care is available for non school days through our After School program at a rate of $38.00 per day. The After School program however, does close for the following Holidays:

- Labor Day
- New Year's Day
- Thanksgiving Day
- M.L. King’s Birthday
- Friday after Thanksgiving
- Christmas Day
- Memorial Day
- Day after Christmas
- Independence Day
- New Year's Eve

Tuition is due in advance on Monday of each week. A $10.00 late charge will be added if the tuition is not paid by Friday of the due week.

In the event of withdrawal, one week’s notice is required. If notice is not given, account will be charged one week of tuition.

I have read this financial agreement regarding tuition payments and agree to abide by it.

SIGNATURE OF PARENT OR GUARDIAN __________________________ DATE __________

Please print name of person who signed above __________________________ Address __________________________

Social Security Number __________________________ City, State, Zip __________________________

Lunches: Balanced hot lunches are available on a pre-order basis at a cost of $4.00 per meal. Meal tickets costing $30.00 each are available through our lunchroom.

Uniforms: Uniforms are required please see the Uniform Policy in the Parent Handbook.

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