



On-Campus Courses and Activities

Legacy Christian School is ready to meet the needs of home-schoolers seeking specific on-campus classes as well as various athletic activities.

We offer classes in the areas of Physical Education, Art, Computer and Music to elementary level students (grades k-5). We can also provide Art and PE classes for middle school (grades 6-8) and High School (Grades 9-10). Homeschooling students will join us on campus to participate in these classes at the times when they are offered.

Our Athletic Department is growing, with an Athletic Director on board specifically charged with bringing this type of athletic competition to our students.

Athletic Competition Available: (requires enrollment in at least one LCS course)

- Boys Basketball: Grades 5-10 (dependent on minimum enrollment)
- Girls Basketball: Grades 5-10 (dependent on minimum enrollment)
- Boys Cross Country: Grades 4-10 (dependent on minimum enrollment)
- Girls Cross Country: Grades 4-10 (dependent on minimum enrollment)
- Girls Volleyball: Grades 5-10 (dependent on minimum enrollment)

Legacy's Academic and Athletic community is constantly evolving, and as it does, we are pleased to continue including our homeschooling partners.

Tuition and Fees for On-campus Courses and Activities		
Art (grades k-5)	\$110 per semester (includes semester supply fee)	45 minutes, 1 day per week
PE (grades k-5)	\$95 per semester	45 minutes, 1 day per week
Computer (grades k-5) (limited space available)	\$95 per semester	45 minutes, 1 day per week
Music (grades k-5)	\$95 per semester	45 minutes, 1 day per week
Art (Grades 6-8) (limited space available)		
Art (Grades 6-8) (limited space available)	\$110 per semester (includes semester supply fee)	45 minutes, 1 day per week
Health (grades 6-8) (limited space available)	\$95 per semester	45 minutes, 1 day per week
Middle School/High School PE (Grades 6-10)	\$190 per semester (includes cost of PE uniform)	50 minutes, 3 days per week
Athletics basketball, volleyball, cross country		
	Based on team fee	

All fees are non-refundable and a one semester commitment is required.



Course Registration Form 2017-2018

Student First and Last Name: _____ Grade: _____
 Parent/Guardian Name(s): _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Phone: _____ Cell Phone: _____
 Parent's email: _____

Course/Activity Information:

Course Name:	Amount:
1.	
2.	
3.	
4.	
Registration Fee:	
Total Due:	

*****Please note all fees are non-refundable and a one semester commitment is required.**

Payment Information:

Cash
 Personal Check or Money Order (payable to LCS)

I agree to enroll my student at Legacy Christian School in the above classes for one semester.

 Signature Date

Please mail registration form and payment to:
 Legacy Christian School
 Attention: Admissions
 470 Lakeview Drive
 Noblesville, IN 46060

Legacy Christian School Emergency Form

(To be completed by a Parent or Guardian)

Student's Name _____ Age _____ Gender _____
Birthplace _____ Birth date _____
Parents/Guardians _____ Home Phone _____
Mom's Work Phone _____ Dad's Work Phone _____
Mom's Cell Phone _____ Dad's Cell Phone _____

In case of emergency: If Parents or Guardian cannot be contacted at one of the above numbers; please list name and phone number of a person to be contacted.

Name & Relationship _____ Phone _____

Name & Relationship _____ Phone _____

Physician _____ Phone _____

Preferred Hospital _____ Phone _____

Waiver/Release Form

I give permission for my child, _____, to participate in all activities of Legacy Christian School, Inc. ("LCS"), either on or off school grounds. I agree to release LCS and hold free from any and all liability LCS, its officers and directors, agents, employees, staff, athletic directors, volunteers, teachers, coaches, representatives, sponsors or other participants, and do hereby for myself, and heirs, executors and administrators, **WAIVE, RELEASE AND FOREVER DISCHARGE ANY AND ALL RIGHTS AND CLAIMS FOR DAMAGES, LOSS, ILLNESS, INJURY OR DEATH** which may occur to my child, myself or any member of my family, including my property, while participating in such activities, whether arising from negligence or otherwise, and which may arise as a result of my child's participation in such activities, and/or for any other reason.

I give permission to LCS, by its teachers, volunteers or any other representative, to seek emergency help for my child in the event a parent/guardian cannot be immediately contacted, including contact of the family physician to examine my child.

(EACH PARENT/GUARDIAN'S SIGNATURE REQUIRED)

Printed Name of Parent/Guardian

Signature of Parent/Guardian

Date

Printed Name of Parent/Guardian

Signature of Parent/Guardian

Date

By signing this document, I acknowledge and understand all terms. _____ (initial) _____ (initial)