



## Summer Program Registration Form 2026

**“The mission of Tree of Life Academy and Early Learning Center, Inc. is to provide an education based on God’s principles in a Christ-centered academic atmosphere, which will enable students to establish a personal relationship with Jesus Christ, develop a respect for authority; and be spiritually, emotionally, intellectually, socially, and physically prepared to meet each challenge life brings.”**

**Tree of Life Early Learning Center  
2812 Greenview Drive  
Lynchburg, Virginia 24502  
Office 434-455-0294  
thetolacademy@gmail.com**

## **Tree of Life Academy Statement of Faith**

Convinced that the Bible is the inspired and only infallible, authoritative Word of God, Tree of Life Academy and Early Learning Center is a Christ-centered, interdenominational, Christian school. It is the policy of the school not to discriminate in the admission of students, or hiring, based on race, color, gender, or national/ethnic origins. Therefore, we affirm the following truths:

1. **Scripture** – We believe the Bible is the inspired and only infallible, authoritative Word of God.
2. **God** – We believe there is one God, eternally existent in three persons: Father, Son, and Holy Spirit. We believe God is the Creator and Sustainer of all things and the Source of all truth.
3. **The Person and Work of Jesus Christ** –We believe in the deity of our Lord Jesus Christ, in 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 where He makes intercession for believers, and in His personal return in power and glory.
4. **The Holy Spirit** – We believe the Holy Spirit, proceeding from the Father and the Son, is of one substance, majesty and glory with the Father and the Son, very and eternal God. We believe in the continuing ministry of the Holy Spirit, in that He dwells within the Christian thus enabling each to live a Godly life.
5. **Satan** –We believe in the reality and personality of Satan: that he is a created being, once known as the “anointed angel” that fell because of pride; that he is the “god of this world” and the “prince of the power of the air”, that the judgment already passed on him will be executed at the Revelation of Jesus Christ; and that ultimately he will be cast into the lake of fire.
6. **Man** –We believe man was created by God in His own image, not by evolution but by a special act of creation. We believe the Scripture records the fall of man through his own disobedience, bringing the whole race under sin and death.
7. **Salvation** – We believe salvation is by grace through faith in the shed blood of Jesus on the cross. Every individual is a sinner by birth; and that all accountable human beings are sinners by practice and choice and therefore must exercise personal faith in the redeeming work of Christ on Calvary and receive Him as Savior in order to be saved.
8. **The Church** –We believe the local church is a congregation of believers associated together by faith and fellowship of the gospel.
9. **The Righteous and the Wicked** –We believe in the resurrection of both the saved and the lost. They who are saved will have eternal life and they who are lost will have eternal damnation.

## Tree of Life Academy Summer Program Enrollment Information for Applicants

The following steps summarize the enrollment process. The necessary forms are attached. If we can be of further assistance to you, please feel free to call.

1. **Registration:** Complete the registration and return it as soon as possible. We must have a copy of the birth certificate that is recorded in the State Bureau of Vital Statistics, a copy of the Social Security card, and the medical information that shows each student's immunizations and boosters are up-to-date. For purposes of enrollment priority, we will use the date that we have received **ALL** of the required information from you.
2. **Fees:** The registration fee and the activity fee are due with the initial registration for enrollment in the Tree of Life Summer Program. Fees are non-refundable.
3. **Physical Examination:** This form must be completed, signed by a physician, and returned as soon as possible. This **MUST** include immunization records.
4. **Reservation:** We will not be able to reserve a place for your child until the following items are completed:
  - a. A completed and signed application form and fees
  - b. A completed and signed contract with Tree of Life Academy and Early Learning Center
  - c. The Family Agreement
  - d. The Emergency Medical Information Card
  - e. The payment of the appropriate fees
  - f. A completed School Health Examination and Immunization Record
  - g. A copy of Birth Certificate and Social Security Card

We look forward to hearing from you.

## Tree of Life Academy Summer Program

Summer\_\_\_\_ Grade Level\_\_\_\_

School\_\_\_\_\_

Bus Number\_\_\_\_\_ Departure Time \_\_\_\_\_ Arrival Time \_\_\_\_\_

### Student Information

Name\_\_\_\_\_ Age\_\_\_\_\_ Sex\_\_\_\_\_ Birth Date\_\_\_\_\_

Address\_\_\_\_\_ Phone\_\_\_\_\_ Place of Birth\_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip\_\_\_\_\_

School last attended\_\_\_\_\_ Reason for leaving\_\_\_\_\_

Do you owe a balance to the last school attended?\_\_\_\_\_

Has the student ever been given a psychological or learning disabilities test? \_\_\_\_\_

If yes, please explain\_\_\_\_\_

Please indicate any history of any other physical or emotional condition or learning disability that has required or might require attention (including attention deficit disorder). Please include copies of all reports. \_\_\_\_\_

Has your child repeated a grade? \_\_\_\_\_ If yes, what grade and why\_\_\_\_\_

Has your child ever been expelled, dismissed, suspended, or refused admission to another school? \_\_\_\_\_

Has your child ever had disciplinary difficulties? \_\_\_\_\_ Explain \_\_\_\_\_

Does your child have any allergies? Foods\_\_\_\_\_ Medications \_\_\_\_\_ Insect stings\_\_\_\_\_

If yes, please explain \_\_\_\_\_

Has your child been on medication for an extended period of time? \_\_\_\_\_ If yes, please explain

**Father's Name** \_\_\_\_\_ **Social Security #(Last 4)** \_\_\_\_\_

**Address** \_\_\_\_\_

**Employer** \_\_\_\_\_

**Home Phone Number** \_\_\_\_\_ **Work Number** \_\_\_\_\_ **Cell** \_\_\_\_\_

**Mother's Name** \_\_\_\_\_ **Social Security #(Last 4)** \_\_\_\_\_

**Address** \_\_\_\_\_

**Employer** \_\_\_\_\_

**Home Phone Number** \_\_\_\_\_ **Work Number** \_\_\_\_\_ **Cell** \_\_\_\_\_

**Other children in the family (please list name, age and grade)** \_\_\_\_\_

**Who is authorized to pick up your child?** \_\_\_\_\_

**Who is NOT authorized to pick up your child?** \_\_\_\_\_

**Marital Status:** Married \_\_\_\_ Widow \_\_\_\_ Divorced \_\_\_\_ Separated \_\_\_\_ Single \_\_\_\_

**Student living with:** Both Parents \_\_\_\_ Father \_\_\_\_ Mother \_\_\_\_ Other \_\_\_\_

If you have checked other, please complete the following:

**Who has legal custody?**

**Name** \_\_\_\_\_ **Address** \_\_\_\_\_ **Home Phone** \_\_\_\_\_

**Employer** \_\_\_\_\_ **Address** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Does the biological parent have legal access? If no, please provide the appropriate legal paperwork such as a custody orders. These must be attached if a parent is not allowed to pick up a child.**

**Other Emergency Contact** \_\_\_\_\_

**Address** \_\_\_\_\_

**Telephone Number** \_\_\_\_\_

**Other Emergency Contact** \_\_\_\_\_

**Address** \_\_\_\_\_

**Telephone Number** \_\_\_\_\_

### Spiritual Background

Are you a Christian? \_\_\_\_ Is your spouse a Christian? \_\_\_\_ Is your child a Christian? \_\_\_\_

If yes, give a short testimony how you became a Christian

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Local church attending \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Pastor's Name \_\_\_\_\_ Is your family a member? \_\_\_\_

Does your family attend church or Sunday School regularly? \_\_\_\_\_

Does your child have Bible reading and prayer time at home? \_\_\_\_\_

What is your reason for wanting to enroll your child in our school? \_\_\_\_\_

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School referred by \_\_\_\_\_

### Summer Program for All Students (K-5<sup>th</sup> Grade)

Registration Fee (yearly)	\$125.00
Activity Fee (yearly) (an increase in the activity fee is subject to the increase of fuel cost)	\$75.00
Tuition 5 Days	\$175.00
3 Days	\$115.00
Additional Daily Drop- In Fee	\$40.00

A family will pay full tuition for the oldest child and the second and third child each will receive a 10% discount. Members in good standing of Tree of Life Ministries will receive a 10% discount.

I would like to receive school newsletters, upcoming events and other notices by e-mail. I understand that Tree of Life Academy and Early Learning Center will not share my e-mail address with anyone and will only use it for official school business.

E-mail address: \_\_\_\_\_@\_\_\_\_\_

This application must be filled out completely before it can be processed. Application and registration fee must accompany this application and is not refundable. An interview with the parents and the child will be required before final acceptance.

No person shall be denied enrollment, be excluded from participation in, be denied the benefit of, or subject to discrimination in any program or activity, based on gender, race, color, national origin or ethnic group. Tree of Life Academy reserves the right to deny admission to any applicant where, by reason of their entry into the school, additional personnel, special training for existing personnel or additional equipment may be required to appropriately meet the needs of the applicant. Attendance at Tree of Life Academy is a privilege. Any student whose conduct, language, or attitude in or out of school shows him/her to be in opposition to the basic principles and purpose of the school, or who maliciously destroys school property, will be asked to withdraw from the school. All parents or legal guardians are required to sign and return the Parental Statement.

### View Student's Proof of Identity and Age

Document /Date/Certificate Number \_\_\_\_\_

Date of Notification of Local Law-Enforcement Agency (when required proof of identity is not provided). \_\_\_\_\_

Date of Application \_\_\_\_\_ Date of Enrollment \_\_\_\_\_

Date transferred/Graduated \_\_\_\_\_

*For office use only*

Emergency Information \_\_\_\_\_ Birth Certificate/Social Security Card \_\_\_\_\_

Signed Contract \_\_\_\_\_ Parental Statement signed and returned \_\_\_\_\_

Health and Immunization Record \_\_\_\_\_ Previous Transcripts \_\_\_\_\_

Registration Fee Paid \_\_\_\_\_ Date \_\_\_\_\_

Activity Fee Paid \_\_\_\_\_ Date \_\_\_\_\_

Tuition Payment Plan:

Weekly (Due on Monday the week of attendance) \_\_\_\_\_

## Parental Statement

Please keep and refer to this copy of Parental Statement.

1. We hereby pledge to pay our financial obligations to the school on the date due and understand that it may be necessary to withdraw our child if prior arrangements are not made on a past due account.
2. We give permission for our child to take part in all school activities and absolve the school from liability to us or our child because of any injury to our child at school or during any school activity. In case of an accident or serious illness, we request the school to contact us. If the school is unable to reach us, we hereby authorize the school to take whatever action it deems necessary.
3. We understand that our child's needs cannot be greater than the educational capabilities of the school.
4. We agree that, if for any reason our child does not respond favorably to the school, we will not seek to alter the Biblical principles under which the school is operating, but will seek to help our child to adjust to these principles in his/her own life. If, in consultation with the administrator and teacher, we are not able to achieve this in a reasonable time, we accept the responsibility to withdraw our child in a spirit of love and cooperation.
5. We agree to uphold and support the academic standard of the school by providing a place at home for our child to study and giving our child encouragement in the completion of any homework or assignments.
6. We appreciate the standards of the school and do not tolerate profanity, obscenity in word or action, dishonor to the Trinity and the Word of God, or disrespect to the personnel of this school. I hereby agree to support all regulations of the school in the applicant's behalf and authorize this school to employ such discipline, as it deems wise and expedient for the training of our child.
7. We understand that the school reserves the right to dismiss any child who fails to comply with the established regulations and discipline or whose financial obligation remains unpaid.
8. Tree of Life Academy and Early Learning Center is a religious institution providing an education in a distinct Christian environment, and it believes that it's biblical role is to work in conjunction with the home to mold students to be Christ-like. On those occasions in which the atmosphere or conduct within a particular home is counter to or in opposition to the biblical lifestyle the school teaches, the school reserves the right, within its sole discretion, to refuse admission of an applicant or to discontinue enrollment of a student. This includes, but is not necessarily limited to, living in, condoning, or supporting sexual immorality; homosexual acts or sexual orientation; promoting such practices; or otherwise the inability to support the moral principles of the school. Romans 1:27, Matthew 19:4-6, Leviticus 20:13a). We understand that the school is an extension of the family and the parent and teacher are co-workers in the child's education. We will contact the teacher and discuss any areas of concern before discussing the problems with others. We will encourage and support our child's teacher.
9. We have read the dress code and will see that our child is comes to school dressed in accordance with the dress code.
10. We understand that our child will not be allowed to leave with an unauthorized person. Any persons other than those authorized on the application form must be designated by the parent/s by either a note or phone call. Identification will be required.
11. We understand that we must provide the school a copy of all appropriate legal paperwork if there are custodial issues.
12. We understand that as an adult, we must exhibit mature, adult behavior and proper language while on school property. If improper behavior and language occurs at any time, our child may be denied the privilege to attend the school.
13. We understand that assessments will be made to cover damages sustained to school property by our child.
14. We will attend the Parent/Teacher conferences. These meetings are necessary for the partnership between the school and the family in the education of our child.
15. We do, hereby, state that we have made a thorough investigation of the philosophy and objectives, discipline and motives of the school, and do agree to make them our choice for this school year.

Father's Signature \_\_\_\_\_ Date \_\_\_\_\_

Mother's Signature \_\_\_\_\_ Date \_\_\_\_\_

Guardian's Signature \_\_\_\_\_ Date \_\_\_\_\_

**Note:** This agreement must be signed by both parents except in the case of a one parent home. A copy will be given to the parent/s and a copy kept in the student file. Returning families need to sign this agreement when they submit their re-enrollment form.

## **Tree of Life Academy Summer Program Contract**

The philosophy of Tree of Life Academy has been established upon the Biblical principle that God has given parents the primary responsibility for educating their children. The Christian professionals and educators at Tree of Life Academy enter into a partnership with the parents to care for the students and to teach the academics integrated with Biblical values. The Bible is the guide for how we ought to live. Its principles for living will be taught to our students daily and students will be encouraged by their teachers to put these principles into practice. It is the role of the school to support and complement the Biblical principles taught at home. We are a school whose board and staff are Christians and thus serve God and families as openly and honestly as we can. It is our hope that all our students and families have or will have a personal relationship with Jesus as Savior and Lord.

### **Understanding the philosophy of Tree of Life Academy, we the undersigned agree to the following items:**

1. To support the pursuit of academic excellence and the development of Christ-like character by being actively involved with our child's educational process
2. That we will adhere to the standard of conduct expected by the school
3. That attendance is a privilege that may be withdrawn upon sufficient cause as determined by the administration.
4. We will be proactive when dealing with the issues of academic, moral, spiritual, and social growth of our child at the school. If a problem or concern should arise, we will take our concern directly to the person involved, in keeping with the Matthew 18 Principle.
5. We will regularly attend such meetings and other functions requiring our participation.
6. Students new to Tree of Life Academy or those returning after being dismissed are accepted on a trial basis for the first thirty (30) days.
7. All withdrawals, whether before the school year begins or during the year, must be made in writing. The total amount due upon withdrawal from Tree of Life will be calculated by adding the cost of 20 additional school days (one month) beyond the effective date of withdrawal. Tuition charges continue until written notice of withdrawal is received in the school office.
8. Tuition payment is due on Monday of the week of attendance. When payment is 30 days delinquent, the child will be removed from class until full payment (this includes the late charges) is made. No reductions will be made for absences during the school year or summer, regardless of the cause of such absences. Tree of Life Academy and Early Learning Center, Inc. is in no way responsible for mail delays and payment is not considered made until it is received at the school office. A \$25.00 charge is added to an account for returned checks to handle the additional processing involved. When checks are returned for the second time, tuition will be required to be paid by cash or money order.
9. To the extent permitted by law, parent/guardian, on behalf of their child/children, does hereby release and waive all claims against Tree of Life Academy for personal injury or property damage arising out of or related to the child/children's attendance at Tree of Life Academy and agrees to hold Tree of Life Academy harmless from any and all claims or suit related to such attendance.
10. We agree to pay the tuition listed below in weekly installments, in monthly installments, or in full. All accounts and obligations to the school must be satisfied before academic transcripts and final report cards can be released. Students cannot be re-enrolled until all accounts are current.

Tuition \$\_\_\_\_\_Registration \$ \_\_\_\_\_Activity \$ \_\_\_\_\_

We have read this contract and its supporting documents carefully and hereby agree to the terms described above.

Father's signature/Guardian \_\_\_\_\_ Date \_\_\_\_\_

Mother's signature/Guardian \_\_\_\_\_ Date \_\_\_\_\_

Administrator's signature \_\_\_\_\_ Date \_\_\_\_\_

**Tree of Life Academy Summer Program  
Student Emergency Information Card**

Student's Name \_\_\_\_\_ Grade \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Age \_\_\_\_\_ Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_

Gender \_\_\_\_\_

Physician \_\_\_\_\_ Phone \_\_\_\_\_

Dentist \_\_\_\_\_ Phone \_\_\_\_\_

Special Health Problems \_\_\_\_\_

Father's Name \_\_\_\_\_ Employment \_\_\_\_\_

Work Phone \_\_\_\_\_ Cell Phone or Pager \_\_\_\_\_

Mother's Name \_\_\_\_\_ Employment \_\_\_\_\_

Work Phone \_\_\_\_\_ Cell Phone or Pager \_\_\_\_\_

Other Emergency Contacts \_\_\_\_\_ Phone \_\_\_\_\_

\_\_\_\_\_ Phone \_\_\_\_\_

\_\_\_\_\_ Phone \_\_\_\_\_

Insurance Provider and Policy Number \_\_\_\_\_

List any allergies your child has \_\_\_\_\_

List any prescription or over the counter medication that your child takes

\_\_\_\_\_

Please sign your name below if permission is granted the school to : (1) Deliver your child to the person named above by you; (2) the doctor named above; (3) the emergency room of the nearest hospital if you cannot be reached. (4) Parents' personal medical/hospital insurance will be the primary insurance for illness or injury.

Father's signature \_\_\_\_\_ Date \_\_\_\_\_

Mother's signature \_\_\_\_\_ Date \_\_\_\_\_

## **Tree of Life Academy Summer Program Dress Code**

Clothing should not have pictures, slogans, or writing on them that offends contemporary Christian standards of decency. This includes any logos or brands associated with violent content. (video games, movies, music)

As the warm weather is among us please remember the school dress code.

- Shorts should be over moderate length.
- Tank tops must be at least 3 fingers wide.
- Dresses and skirts should be of adequate length and have shorts worn underneath.
- Sock and tennis shoes must be worn at ALL times.
- Sundresses and halter tops are NOT allowed.
- Sandals, flip-flops and crocs are NOT allowed for safety reasons.

### **Items Brought To School**

Lunch boxes, book bags, notebooks, gym bags, or anything relating to these categories should not have pictures, slogans, or writing on them that offends contemporary Christian standards of decency. All items must be labeled with the student's name.

## Tree of Life Academy Summer Parent Agreement

The application process is not complete and the student cannot attend until this agreement is signed and returned to the office.

I, \_\_\_\_\_, whose child, \_\_\_\_\_

is enrolled in Tree of Life Academy, have received a copy of the Parent's Handbook. I have read and understand the policies and guidelines in the Parent Handbook and I agree to abide by them.

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

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### Agreements

1. Tree of Life Academy agrees to notify the parents(s)/guardians(s) whenever the child becomes ill and the parent(s)/guardian(s) will arrange to have the child picked up as soon as possible if so requested by the school.
2. The parent(s)/guardian(s) authorized Tree of Life Academy to obtain medical care if any emergency occurs when the parent(s)/guardian(s) cannot be located immediately.
3. The parent(s)/guardian(s) agree to inform Tree of Life Academy within 24 hours or the next business day after his child or any member of the immediate household has developed a reportable communicable disease, as defined by the State Board of Health, except for life threatening diseases which must be reported immediately.

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

**Religious Exempt Child Day Center**  
**Program Decision to Administer Medications**

Tree of Life Academy has made the following decision regarding the administration of medications to a child in our program:

The staff **WILL NOT** administer prescription and non-prescription medications.

Provider and parent of each enrolled child must sign below. The provider must maintain a copy of this form in each child's individual record.

Provider's Name (please print):	Facility Name: Tree of Life Academy and Early Learning Center
Provider's Signature:	Date:
Parent's Signature:	Date:

**Authorized Staff to Administer Prescription Medication**

The program will administer prescription medications in accordance with the physician's or other prescriber's instructions and in accordance with the standards of practice in the MAT training. Only a provider who has successfully completed the MAT training or has appropriate licensure to administer prescription medications and is listed as a medication administrator in the Program's Decision Regarding Medication Plan will be permitted to administer prescription medications.

I understand that any individual listed in this section as a medication administrator is approved to administer prescription medication using the following routes: topical, oral, inhaled, eye, and ear, medication patches and epinephrine using an auto-injector device.

I understand that to be approved to administer prescription medication, all individuals listed in the Program's Decision Regarding Medication Plan (unless the individual is licensed to administer prescription medications) must have a valid:

- Medication Administration Training Certificate (MAT)
- CPR certificate which covers all ages of the children Tree of Life Academy is approved to care for as listed on the registration/license; and
- First aid certificate which covers all ages of children Tree of Life Academy is approved to care for as listed on the registration/license.