



Family Name: _____

In compliance with the Personal Information Privacy Act, Valley Christian School requires the consent of parent(s) or guardian(s) to collect, store and utilize personal information. Please carefully read the information below.

I/We consent to having VCS collect personal information that may include: student identification information, birth certificate, legal guardianship papers, court orders if applicable, parents' work numbers and email addresses, emergency contact name and number, doctor's name and number, health insurance number, behavioral, academic and health information, most recent report card, and any similar information needed for registration.

I further consent to the use and disclosure of information contained in this form and otherwise collected by or on behalf of VCS (1) for the purpose of establishing, maintaining, and terminating the student's or parent's relationship with VCS, (2) for the additional purposes identified when or before personal information is collected, and (3) as otherwise provided in VCS's Personal Information Privacy Policy, a copy of which is available on request. I also consent to the collection, use and disclosure of such personal information by and to agents, contractors and service providers of VCS.

This information is required in order to register your child at Valley Christian School and assist the school authority in making an informed decision as to your child's suitability and appropriate placement in the school. It will also allow the school to respond immediately to an emergency.

Promotional Consent:

I/We consent to having photographs, videos and work samples of my child used by VCS in newsletters, Facebook, Instagram, the school website, and other school promotional material, as well as full names used in the yearbook. *NOTE: Full names will never accompany a photo/video of your child on social media, the website or other promotional material without your separate explicit permission.*

School Directory Consent:

I/We consent to having our family information (ie. names, phone number, address, etc.) included in an internal school phone directory for the purposes of emergency class lists, etc.

Please sign and date. You may cross out and initial any section that you do not wish to consent to.

Name: _____ Signature: _____ Date: _____

Valley Christian School acknowledges that there will be no disclosure of personal information to unauthorized personnel or third parties who are not directly involved in planning or delivering education, health, social or other support services to that student. The school will securely store all digital and hard copy parent and student personal information.

Valley Christian School Privacy Officer



Medical Information

Student Name: _____ Care Card Number: _____

Family Doctor: _____ Doctor Phone Number: _____

Does your child have any of the following potentially life-threatening conditions?

- ☐ yes ☐ no Anaphylaxis (extreme allergic reaction)
☐ yes ☐ no Diabetes
☐ yes ☐ no Serious Heart Condition
☐ yes ☐ no Severe Asthma
☐ yes ☐ no Blood Clotting Disorder
☐ yes ☐ no Convulsions or Seizures

Other: _____

Describe: _____

Does your child have any other medical conditions or take medication regularly? If so, please specify.

Does your child require medication to be administered by VCS staff during school? If so, explain.

Emergency Contacts

Emergency Contact #1: Parent/Guardian, as listed on page 1 (will be called 1st in an emergency)

Emergency Contact #2: Parent/Guardian, as listed on page 1 (will be called 2nd in an emergency)

Emergency Contact #3: Relative/Friend (will be called 3rd in an emergency)

Contact Name: _____ Relationship to Child: _____

Home Phone: _____ Cell Phone: _____

Emergency Contact #4: Relative/Friend (will be called 4th in an emergency)

Contact Name: _____ Relationship to Child: _____

Home Phone: _____ Cell Phone: _____



Learning Assistance

At Valley Christian School, we strive to ensure that each student receives the help they need to be a successful learner. The following information will help us to provide the best education possible with the available staffing and resources.

Student Name: _____ Grade in 2026-2027: _____

Is English your child's first language? ☐ yes ☐ if no, first language: _____

Does your child have any specific learning needs that require additional or Inclusive Ed support?

☐ no ☐ yes Describe: _____

Has your child been diagnosed with or do you suspect any of the following:

ADD/ADHD ☐ no ☐ diagnosed not diagnosed, but issues arise ☐ at home ☐ at school

Anxiety Disorder ☐ no ☐ diagnosed not diagnosed, but issues arise ☐ at home ☐ at school

Behavioral Issues ☐ no ☐ diagnosed not diagnosed, but issues arise ☐ at home ☐ at school

Has your child ever had an Individualized Education Plan (IEP)?

☐ no ☐ yes, previously ☐ yes, currently (if currently, please include a copy of most recent IEP)

Has your child ever had a Psych Ed Report?

☐ no ☐ yes (if yes, please include a copy)

Has your child ever been designated as a student with diverse needs at a school in BC?

☐ no ☐ yes Inclusive Ed Category: _____ School Year: _____

Has your child ever received the following services:

Learning Assistance (1-to-1 or group pull-out) ☐ no ☐ yes School Year: _____

Support of an Educational Assistant (EA or SEA) ☐ no ☐ yes School Year: _____

Speech & Language Therapy (SLT) ☐ no ☐ yes School Year: _____

Therapy (Occupational or Physical) ☐ no ☐ yes School Year: _____

Counselling ☐ no ☐ yes School Year: _____

Other: _____ School Year: _____



Family Form

Family Name: _____

School Year: 2026-2027

How did you hear about VCS? ☐ Referral* ☐ Facebook ☐ Website ☐ Other: _____

*If directly referred by a family currently attending VCS, specify name: _____

Statement of Personal Christian Experience & Faith

Mother: _____

Father: _____

Explain why you wish for your children to attend VCS:

Church or Denomination Affiliation

Mother's Church: _____ Attendance: ☐ regular ☐ irregular ☐ seldom

Father's Church: _____ Attendance: ☐ regular ☐ irregular ☐ seldom

Family References

Pastor's Name: _____ Church: _____
Phone Number: _____

Neighbour, Business Assoc., _____ Relationship: _____

or Christian Reference Phone Number: _____



Valley Christian School Philosophy

We believe that:

- * Jesus Christ was begotten by the Holy Spirit and born of a virgin and is true God and true man.
- * there is only one God eternally existing in three persons: Father, Son, and Holy Spirit.
- * the Holy Scriptures are inspired of God and are our only infallible rule of faith and practice.
- * a Christian school should be Christ centered in all that it is, all that it does, and all that it conveys.
- * a Christian school should educate and train students to know and lovingly respond to God, deal creatively with life's challenges, and learn to love and serve others for now and eternity.
- * whoever by faith, apart from works of any kind, receives the Lord Jesus Christ as his Saviour is "born from above".
- * (born again) and thereby becomes a child of God, "created in Christ Jesus to do good works".
- * the Holy Spirit lives in the believer and enables him to walk in purity of life and submission to the will of God.

Valley Christian School Goals

We believe that education is not complete without the spiritual and moral development of the student.

Therefore, our goals are:

- * to provide opportunities for the student to accept and confess Christ as Saviour and Lord. (Rom. 10:9,10)
- * to teach that the Bible is the inspired and the only infallible authoritative Word of God; and to teach the basic doctrines of the Bible, thus developing attitudes of love and respect toward it. (II Tim. 3:15-17, II Peter 1:20,21)
- * to teach Biblical character qualities and provide opportunities for the student to demonstrate these qualities. (I Sam. 16:7; Gal. 5:22,23)
- * to teach the student how to develop the mind of Christ towards Godliness. (Phil. 2:5, I Tim. 4:7)
- * to encourage the student to develop self-discipline, responsibility, and the respect for and submission to authority from God's perspective. (Rom. 13:1-7; Heb. 13:17; Eph. 6:1-3)
- * to help the student develop a Christian world view by integrating life, and all studies, with the Bible. (II Peter 1:3)
- * to teach the student to hide God's Word in his heart through memorization. (Ps. 119:11; Ps. 1:1-3)
- * to help the student develop his self-image as a unique individual created in the image of God and to attain his fullest potential. (Ps. 139:13-16)
- * to teach the student to treat everyone with love and respect as unique individuals created in God's image. (Phil. 2:1-4; Eph. 5:21)
- * to teach the student Biblical skills for personal and social relationships. (Ps. 119:9; Eph. 4:12)
- * to teach the student physical fitness, good health habits, and wise use of the body as the Temple of God. (I Cor. 6:19,20)
- * to teach the student an appreciation for God's world and Biblical attitudes toward material things and his responsibility for using them to God's glory. (I Tim. 6:17-19; Matt. 6:19,20; I Cor. 10:31)
- * academically, to provide an education that must meet or surpass the standards as set forth by the Ministry of Education of British Columbia.

We have read the above statement of Valley Christian School Philosophy and Goals and agree to have our child(ren) taught according to these goals and philosophy. I understand that by agreeing to the above statements, I am hereby a member of the Valley Christian School Society, and therefore have voting privileges. ☐ Yes ☐ No

Father's Signature

Mother's Signature

Date



Legal Residency of Parent - Form A

(If parents deceased, use Form B)

To be completed and signed by a parent or legal (court-appointed) guardian. If legal guardian, attach a copy of court order appointing you as legal guardian.

Lawful Admission into Canada

I am (please X one):

- ☐ A Canadian citizen - born in Canada
- ☐ A Canadian citizen - not born in Canada (attach photocopy of citizenship paper/card)
- ☐ A landed immigrant (attach Permanent Resident "PR" card)
- ☐ Lawfully admitted to Canada under one of the following documents (please mark the appropriate box below and attach photocopy of document):
 - ☐ Admission as a refugee claimant
 - ☐ A person claiming refugee status who has a letter of no objection
 - ☐ Student Visa for 2+ years (or issued for 1 year but anticipated to be renewed for 1+ year)
 - ☐ Employment authorization (working permit) for two or more years (or issued for one year but anticipated to be renewed for one or more additional years)
 - ☐ A person carrying out official duties as a diplomatic or consular official (with a foreign representative acceptance counter foil in his/her passport)
 - ☐ Other - document description: (must be cleared with Immigration Canada)

Residency in British Columbia

- ☐ Yes, I am a resident of British Columbia:

Residency address: _____

- ☐ No, I am not a resident of British Columbia

Confirming Signature:

Parent/Legal Guardian Name: _____

Parent/Legal Guardian Signature: _____

Date: _____



VALLEY
CHRISTIAN
SCHOOL

...for life and eternity

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Family Financial Form (one per family)

School Year: 2026-2027

Parent/Legal Guardian Information (as it will be listed on your Tax Receipt)

Legal Last Name	Legal First Name	Middle Init.	Email Address for Invoice Portal
Legal Last Name	Legal First Name	Middle Init.	
Mailing Address		City	Postal Code

If someone other than the parents/guardians listed above will be paying tuition, fill in their info below:

Last Name	First Name	Middle Init.	Home Phone	Cell Phone
Mailing Address		City	Postal Code	Contact Email Address


Please list all children attending VCS (and ACS under the tuition sharing agreement)

Last Name	First Name	Grade in	VCS Enrollment Gr. K-8	ACS Enrollment Gr. 9-12 Tuition Share
1. _____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
2. _____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
3. _____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
4. _____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
5. _____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

Payment Options

- ☐ We will pay in **FULL** by September 30
- ☐ We will pay with the **10-MONTH** pre-authorized payment plan on the 1st of each month (September to June)

I agree to Valley Christian School's terms listed on the back of this *Family Financial Form*.

_____	_____		_____
Date	Name		Signature of Parent/Guardian



VCS Finance Policies

Registration Fee

- A non-refundable registration fee (applicable to first 3 children in family) will be collected from families annually upon registration/re-registration.

Tuition Payment Dates:

- Fees can be paid in full before September 30.
- Fees can be paid in 10 monthly installments on the 1st of the month (Sep 1 to Jun 1) by e-transfer or credit card.

Late Entry/Early Departure:

- If student transfers to VCS mid-year before the 16th of the month, you will be charged a full month's fees.
- If a student transfers to VCS mid-year after the 15th of the month, they will be charged half a month's fees.

30-Day Withdrawal Notice:

- Students withdrawing from VCS mid-year are required to give 30 days notice or pay one full month's tuition in lieu of notice.

Non-Sufficient Funds Fee:

- Should your payment be returned NSF, you will be subject to a \$50 administration fee.

Outstanding Accounts:

- Accounts with outstanding fees as of August 15th must either be brought up to date or have worked out a payment plan with the Bookkeeper in order to be eligible for enrollment.
- Outstanding tuition payments will accrue interest at a rate of 18% per annum added after 31 days in arrears. Interest will be added every 30 days thereafter.

We thank you for your commitment to Christian Education and your continued support of Valley Christian School.