Grayson Christian School

1st Thru 5th grade

Enrollment Checklist 2026- 2027

The following are the components in the application process for all new students desiring enrollment in Grayson Christian School.

- √ Interview with Principal
- √ Application Fee
- √ Diagnostic Testing
- √ Student Application
- √ Records Release Form for previous school records
- √ Emergency Medical Release
- √ Copy of Birth Certificate and Social Security Card
- √ Immunization Records from your doctor showing that your student is up to date with the newest State of Texas immunization guidelines or an Exemption Affidavit available at https://co-request.dshs.texas.gov/
- √ Student Recommendation Form
- √ Computer Terms of Agreement
- √ Completed RenWeb Enrollment, then follow the link to complete FACTS enrollment

All of the forms above must be completed and turned into the school office before a student can be considered for enrollment at Grayson Christian School.

Once all components of the application process are completed, you will receive a letter within five business days concerning the acceptance of the applying student(s).

If for any reason the applicant decides to cease the enrollment process, the enrollment fee is non-refundable; however if for any reason a new applicant is denied acceptance by Grayson Christian School, a refund of the enrollment fee will be issued.

Grayson Christian School admits students of any race, color, or national and ethnic origin, and this admission will afford to them the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national and ethnic origin in administration of its educational policies, admissions policies, and athletic and other school-administered programs.

Grayson Christian School
Financial Information
2026 - 2027

Registration Fees	(Non-refundable)
Per New Student	$100 Application/Testing Fee (due upon submission) $275 Registration Fee (due within 10 days of acceptance)

Tuition and Student Fees	(Paid in 10 monthly payments from July-April through FACTS Tuition Management)
	Customers may choose to start the 10 monthly payments beginning on July 5th or July 15th.
K3-K4 per student	$5,950 year (includes tuition, activity fee, and lab fees) $595.00 per payment
Grades K5-6th per student	$7,350 year (includes tuition, activity fee, and lab fees) $735.00 per payment
Grades 7th-12th per student	$7,950 year (includes tuition, activity fee, and lab fees) $795.00 per payment
K3-2nd Curriculum Fee	$600 per year ($500 if paid by June 5th) or may be broken down into 10 monthly
(Non-refundable)	payments with tuition (July-April) through FACTS
	*This includes books, curriculum aids, science supplies, and school supplies.
3rd-12th Curriculum Fee	$700 per year ($600 if paid by June 5th) or may be broken down into 10 monthly
(Non-refundable)	payments with tuition (July-April) through FACTS
	*This includes books, curriculum aids and science supplies.
	*This does not include notebooks, pencils, and specific class requirements.

*****Families that select an invoice plan vs. automatic payments will pay an invoice fee of $300/year.**

Miscellaneous Fees	
Hot Lunch	Charges vary; see menu items. These are to be pre-paid at the beginning of the month.
Extended School Day	Open from 7am-8:30am and 1:30pm-6pm Grades K3-K4— $1,500/yr. paid in 10 payments of $150 per payment (July-April) Grades K5—6th— $750/yr. paid in 10 payments of $75 per payment (July-April)
Fine Arts Competition	Charges will vary depending on location and length of trip
P.E. Uniforms	$32 per set (shirt & shorts) ($24 per set for toddler sizes)
Graduation Fees	$350 for 12th grade students (Due in March)
Music Lessons	Charges will vary depending on teacher and instrument.
Late Fees	$45 if account is not paid-in-full by each due date
NSF Fees	$30 for returned checks from the bank for insufficient funds
Withdrawal Fee	$100 plus the remainder of the Curriculum Fee if you choose to withdraw your child during a school year
Athletic Fee	Varies by sport

Financial Aid	
Multiple Student Discount	2nd child - $500/yr., 3rd child - $1000/yr., 4th child - $1,500/yr.
Advance Discount	$200 tuition reduction if you pay for the year in its entirety by July 5th $100 tuition reduction if you pay for the year by semester (July 5th and January 5th)
Student Referral Discount	$200 tuition reduction if you recruit a family to attend GCS. (See office for details.)
Ministry Scholarship	Tuition reduction given to families whose head of household gains their principle income from full-time vocational ministry. (40+ hours of active work & approved by administration)

Fundraisers

GCS has fundraisers throughout the year to help the school purchase things that will enhance its educational and extracurricular benefits. Your participation is greatly appreciated!

Application for Enrollment

1st - 5th Grade

This application does not assure final enrollment but provides information upon which a decision will be based.

The following must accompany this application:

[ ] Birth Certificate [ ] Social Security Card [ ] Standard of Conduct

[ ] Emergency Medical Form [ ] Computer Access Survey

[ ] Up-to-date Immunization Records or Exemption Affidavit

Office Use Only

	Amount	Date
App. Fee		
Reg. Fee		
Curr. Fee		
Tuition		
Total		
Check #		

Cash _____ Credit Card _____

Grayson Christian School
4400 E. Hwy 82
Sherman, TX 75090
903-892-3304
Fax 903-868-2546
www.graysonchristian.org

Student Information

***Note: Application must be made by the family with whom the student resides.**

Date _____ Grade Entering _____ SS# _____

Name _____ / _____

Last Name First Name Middle Initial Nickname

Sex_____ Age _____ Birth Date _____/_____/_____ Completed/Current Grade_____

Month Day Year (Circle One)

Last School Attended/Attending: _____

School Address _____

Street City State Zip Code

Has student professed faith in Christ? _____ Father? _____ Mother ? _____ Financially Responsible

Will the student be utilizing the Extended School Day Program? [ ] Yes [ ] No [ ] Father [ ] Mother

Family Information

Mr. _____ _____

Last Name First Name Middle Initial Relationship to Student

Mrs. _____ _____

Last Name First Name Middle Initial Relationship to Student

Student's Home Address _____

Street City State Zip Code

Student's Home Phone (_____)_____ Student's Cell Phone:(_____)_____

Father's Cell Phone (_____)_____ Father's Email: _____

Mother's Cell Phone (_____)_____ Mother's Email: _____

Marital Status: [ ] Married [ ] Divorced [ ] Separated [ ] Widowed [ ] Single

If divorced or separated, please provide the address of the non-custodial parent:

_____

Name Street Address City State Zip Code

Father's Occupation _____ Business Phone (_____)_____ Ext._____

Father's Place of Employment _____

Church Attending _____ Services per week attended? 0-1, 1-2, 2-3

Mother's Occupation _____ Business Phone (_____)_____ Ext._____

Mother's Place of Employment _____

Church Attending _____ Services per week attended? 0-1, 1-2, 2-3

Emergency Contacts, other than parents, if parents can not be reached:

Name _____ Relationship to Student _____Phone (_____)_____

Name _____ Relationship to Student _____Phone (_____)_____

ADDITIONAL INFORMATION

Has the applicant ever repeated a grade? [ ] Yes [ ] No
If yes, explain: _____

Has the applicant ever been expelled, dismissed, suspended, or denied admission to another school?
If yes, explain: _____

_____

Has the applicant ever been tested for a learning deficit? [ ] Yes [ ] No
If yes, a copy of those results should be attached to this application.

If the applicant has had any disciplinary difficulty, please state briefly: _____

_____

List any medical conditions, physical defects, or allergies that limit activities: _____

_____

Are there any emotional or behavioral problems we should know about? _____

_____

How did you hear about our school? _____

_____

Please state why you seek admission for your child(ren) to Grayson Christian School: _____

_____

_____

To comply with Texas state law, a student under 12 years of age must provide the school with the following documentation with the student's application:

(1) A copy of the student's birth certificate
(2) Copies of previous school records verifying the student's name, address, birthdate, grades, and dates attended.

Previous school #1: Name of school: _____
Last Grade Completed: _____ Attended from: _____to_____ Phone: (_____)_____
Address: _____City_____State_____ Zip _____
Reason for leaving: _____

Previous school #2: Name of school: _____
Last Grade Completed: _____ Attended from: _____to_____ Phone: (_____)_____
Address: _____City_____State_____ Zip _____
Reason for leaving: _____

_____

Extended School Day Program

K3 - 6th Grade Students Only

The ESD Program is open from 7:00 - 8:30 am and 1:30 - 6:00 pm for K3 - K5 students and from 7:00 - 8:30 am and 3:30 - 6:00 pm for 1st - 6th grade students. The cost of the ESD program for K3 - K5 students is $1,500/yr. paid in 10 payments of $150.00 per payment from August - May. The cost for 1st - 6th grade students is $750/yr. paid in 10 payments of $75.00 per payment from August - May. One key fob is issued per family for pickup purposes. Additional and/or replacement cards are $10.00 each.

Will your student be utilizing the Extended School Day Program? [ ] Yes [ ] No

Number of key fobs needed? _____

All students must be picked up must by 6:00 pm each evening. Failure to pick up a student by that time results in an additional fee of $1.00 per minute after 6:00 pm.

I have read the above information and agree to any and all charges from the ESD Program.

_____ _____

(Signature of Father) *(Signature of Mother)*

_____ _____

(Date) *(Date)*

Statement of Cooperation

It is agreed that Grayson Christian School will hold the applying family to be:

a. solely responsible for all financial obligations incurred by the applicant.

b. supportive of the school's statements of Philosophy and Mission.

c. the authorized recipient of all school notices.

It is understood that enrollment at Grayson Christian School is a financial obligation. Financial accounts must be kept current. Application and registration fees are non-refundable.

I/we give permission for my/our student to take part in all campus activities, including P.E. class, except when affected by physical conditions described on this application. I/we give permission for my student to take part in all school-sponsored trips away from campus for which he or she is eligible, with the understanding that the school will notify me/us of such trips ahead of time. I/we give permission for photos and/or video of my/our student to be used in printed or digital material. I/we understand that my/our student must both receive my/our written permission and meet the schools academic eligibility requirements before being allowed to participate in interscholastic sports. In respect for the diligent concern and vigilance of the school staff, I/we will not hold the school liable for any injury to my/our child at school or during any school activity.

I/we agree to provide a suitable place at home for my/our student to use for completing homework and agree to encourage my/our student to properly complete all homework assignments.

I/we respect moral standards of the school and will not tolerate in my/our home any profanity, obscenity, or dishonor to the Godhead or the Word of God or disrespect for school personnel. I/we agree to support all the rules of the school on my/our student's behalf and authorize the school to carry out any discipline of my/our child that the school deems needful, in accordance with school policy as published in the *Parent/Student Handbook.*

I/we agree that attendance in this school is a privilege, not a right, and the school has the right to withdraw any student who fails to comply with school rules, or who fails to comply with discipline, or whose school bill remains unpaid for more than 30 days. Parents of students who do not respond to authorized correction from administration will be asked to come discipline student at school and/or take student home.

I/we have read the Parent/Student Handbook and agree to participate in the school's parent orientation program. I/we have understood the obligations that were stated on this Application, and I/we agree to abide by them.

_____	_____
(Signature of Father)	*(Signature of Mother)*
_____	_____
(Date)	*(Date)*

Grayson Christian School admits students of any race, color, or national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, or national or ethnic origin in administration of its educational policies, admissions policies, and athletic- and other school-administered programs.

All students accepted by Grayson Christian School enter on academic probation for one year.

For Office Use Only	**Diagnostic Testing** _____	**Acceptance Letter Sent**_____
	Requested Records_____	**Received Records** _____
	Set Up In RenWeb _____	**Set Up Classes/RenWeb**_____
	UDID# _____	

STUDENT RECORD RELEASE

Date: _____

RELEASING SCHOOL

School Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Dear Counselor:

The following students have been withdrawn from your school.
Please release their academic and health records to the accepting school.
Thank you for your help with this matter!

Name of Student	*Date of Birth*	*Current Grade Level*

_____ _____

Signature of Parent or Guardian *Signature of Receiving Principal*

ACCEPTING SCHOOL:
Grayson Christian School
4400 E. Hwy 82
Sherman, TX 75090
PH: 903-892-3304

EMERGENCY MEDICAL TREATMENT PERMISSION FORM

Grayson Christian School, 4400 E. Hwy 82, Sherman, TX 75090

Phone: 903-892-3304

Child's Name _____ Birthdate _____

Allegies:_____

_____

Other helpful emergency information the school or doctors should know: _____

_____

_____

Father's Name: _____

Home or Cell Phone _____ Business Phone _____

Mother's Name: _____

Home or Cell Phone _____ Business Phone _____

Guardian's Name: _____

Home or Cell Phone _____ Business Phone _____

Physician _____ Phone _____

I (we) hereby grant the school staff permission to administer pain relief medication in a non-emergency situation. (Tylenol, Ibuprofen, Pepto/Tums, Benadryl, Cough Drops, Neosporin/Itch Cream, Band-Aids)

Please list any exclusions: _____

I (we) hereby grant the school principal or staff permission to take whatever steps they deem necessary to obtain emergency medical care for my child. These steps may include, but are not limited to, the following:

1. Attempting to contact a parent or guardian.
2. Attempting to contact a child's physician.
3. Attempting to contact a parent or guardian through any of the persons listed on the emergency information form relating to the child.
4. Calling another physician, if the child's physician is not reached.
5. Calling an ambulance.
6. Having a child taken to an emergency room in the company of a staff member.

I agree that any expense incurred under steps 4, 5, or 6 above will be my responsibility as the undersigned parent/guardian.

Father's signature _____Date _____

Mother's signature _____Date_____

Guardian's signature _____Date_____

Family Address_____

Street City State Zip Code

Another relative's name and phone in case a parent or guardian cannot be reached:

Name _____Relationship _____ Phone _____

Student Recommendation Form

Grayson Christian School
4400 US Hwy 82 E.
Sherman, TX 75090
Phone: 903.892.3304
Fax: 903.868.2546

TO BE COMPLETED BY STUDENT/PARENTS:

Student's Full Name _____

I freely and voluntarily waive my rights of access to any and all information contained in these recommendations and agree that any comments below will remain confidential.

Student Signature _____ Date _____

Parent Signature _____ Date _____

Confidentiality Agreement:
Grayson Christian School will not discuss with others the content of any specific student records nor will we disclose personally identifiable student information, or any other information regarding individual students. The information obtained from these recommendations will be for office use only.

****

[Please supply a name for each type of recommendation.]

Pastoral or Church Leader Recommendation:

Name _____

Church Name _____

Phone Number _____

Teacher Recommendation:

Name _____

School Name _____

School Phone Number _____

Personal Recommendation:

Name _____

Relationship _____

Phone Number _____

2026 - 2027 Terms of Agreement for

Student Computer Use - Grayson Christian School

Responsibility

1. I understand that the laptop/tablet is my responsibility while it is checked out to me. I will take all reasonable precautions to protect it. If others use it while it is checked out to me and damage or loss occurs, I understand that I will be held liable for any loss, damage, or criminal acts that may occur.
2. I agree that I will be responsible for repair or replacement of the computer and its accessories due to any loss, damage, or theft. I understand that replacement cost of the laptop/tablet is approximately $350 or current market price.
3. I understand that it is my responsibility to make arrangements with Grayson Christian School to pay any and all charges incurred as a result of improper use, loss, or theft of laptop/tablet. Failure to do so may result in an inability to register for classes or receive my diploma or transcripts.

User Guidelines

1. Misuse of Passwords/Unauthorized Access - Students may not share passwords, use other users' passwords, access or use other users' accounts, or attempt to circumvent network security systems.
2. I understand that under no circumstances will I sign in under the guest log in. **Student violation may result in suspension and/ or expulsion.**
3. I recognize that all Internet and electronic communication access is provided to students for educational purposes only. Students may not access blogs, social networking sites, etc. to which student access is prohibited. No streaming of videos is allowed unless approved by Administration or Teachers.
4. I agree to adhere to the terms and conditions outlined in licensing agreements including but not limited to licensing grant restrictions, copyright restrictions, and transfer restrictions.
5. I recognize that all Internet and electronic communication access is provided to students for educational purposes only. I may not involve activities that are unethical, illegal, immoral, profane, obscene, or pornographic.

Liability

1. I understand that Grayson Christian School is NOT responsible for loss of data or damage to files that may occur due to the use of the laptop/tablet.
2. I understand that this agreement must be renewed each academic year and that a loss of privileges will occur for a failure to comply to these policies and guidelines.

Laptop/Tablet Damage Rates

1. Replacement due to loss or damage: $350 (or current market price)
2. Intentional vandalism (includes any scratches or marks on any part of the laptop/tablet, removal or rearrangement of keys, or any other malicious damage): $100 minimum charge or actual repair cost

I have read this document and fully understand its terms and my obligations. I understand that this document is contractual in nature, and as a user of the Grayson Christian School's computer network and recipient of a laptop/tablet, I hereby agree to comply with this user agreement.

Student's Signature: _____ Date: _____

Printed Student's Name: _____ Date: _____

Parent's Signature: _____ Date: _____