

PHOTO
3 x 4 cm

Application Form

Date of Application (yyyy/mm/dd)	
Child's Information	
Student's Name: (in alphabet and Kanji if necessary)	
Date of Birth (yyyy/mm/dd):	Age:
Nationality: Please enter all if multiple)	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female
Address:	
Student's native language:	Language(s) spoken:
Level of English: <input type="checkbox"/> Native <input type="checkbox"/> Advanced <input type="checkbox"/> Intermediate <input type="checkbox"/> Beginner	
Family Information	
Parent / Guardian Name: (in alphabet and Kanji if necessary)	Relationship:
Nationality:	Language(s) spoken:
Address: (if different from above)	
Home phone number:	Mobile Number:
Email address:	Business Phone Number:

Emergency Contact (if parents cannot be reached)

Name: (in alphabet and Kanji if necessary)	Relationship:
Telephone number:	Email address:

Academic Background

School Name / Location	Dates Attended	Grade Completed

Tell us about your child

Describe any of your child's special talents or needs that might help us care for them more effectively:

Describe any personality traits or behavioral issues that you would like the school to be aware of:

Medical History

Condition	Yes	No	Medications / Description/ Limitations / Concerns
Asthma			
ADD /ADHD			
Learning Difficulty			
Developmental Disability			
Diabetes			
Heart Disease			
Seizures			

Major Surgery, Accidents			
Allergies			
Medications			
Food			
Other health conditions			
Program(s) Applied For:			
<input type="checkbox"/> Apprentice (1-2)	<input type="checkbox"/> Squire (2-3)	<input type="checkbox"/> Knights (3-4)	
<input type="checkbox"/> Commanders (4-5)	<input type="checkbox"/> Nobles (5-6)	<input type="checkbox"/> 小学部 (G1-G5)	
<input type="checkbox"/> Summer School (1-8)		<input type="checkbox"/> Winter School (1-8)	
Early Childhood and Seasonal Programs			
<input type="checkbox"/> Morning (8:30 - 14:30)	<input type="checkbox"/> Afternoon (14:00 - 18:00)	<input type="checkbox"/> All Day (8:30 - 18:00)	
Primary			
<input type="checkbox"/> Standard Primary (8:30-15:30)		<input type="checkbox"/> Primary Plus (8:30-17:30)	
Application Check List			
Early Childhood	Primary	Seasonal School	
<input type="checkbox"/> Application for Admission	<input type="checkbox"/> Application for Admission	<input type="checkbox"/> Application for Admission	
<input type="checkbox"/> Admission Fee (JPY20,000)	<input type="checkbox"/> Admission Fee (JPY20,000)	<input type="checkbox"/> Admission Fee (JPY20,000)	
<input type="checkbox"/> Relevant Visa / Residency Status / Copy of the Passport (For Non-Japanese)	<input type="checkbox"/> Relevant Visa / Residency Status / Copy of the Passport (For Non-Japanese)	<input type="checkbox"/> Relevant Visa / Residency Status / Copy of the Passport (For Non-Japanese)	
<input type="checkbox"/> Copy of Recent Health Check	<input type="checkbox"/> Copy of Recent Health Check	<input type="checkbox"/> Copy of Medical Insurance	
<input type="checkbox"/> Relevant Medical History	<input type="checkbox"/> Relevant Medical History	<input type="checkbox"/> Copy of Boshi-techo (Mother-child handbook)	

<input type="checkbox"/> Copy of Medical Insurance	<input type="checkbox"/> Copy of Medical Insurance	
<input type="checkbox"/> Copy of Boshi-techo (Mother-child handbook)	<input type="checkbox"/> Academic School Records	
<input type="checkbox"/> Academic School Records	<input type="checkbox"/> Recommendation Letter	

ENROLLMENT AGREEMENT

Please initial each section listed below, then sign and date the last page. SECTION 1: TUITION AND FEES

____ NO REFUND POLICY: I understand that Louis Academy adopts a policy of no refunds, and that refunds are unavailable at any time for any reason.

____ TUITION FEE: I understand the tuition rates for the programs I have chosen. I understand these rates are subject to change with reasonable notice. I also understand that Louis Academy has a yearly tuition rate, which can be spread evenly over 12 months for my convenience. I understand that if I choose to take advantage of the monthly payment system that each monthly payment will be identical and that discounts will not be available for months where there are school holidays.

I wish to pay my child's tuition: Monthly Termly Yearly

____ PAYMENT OF TUITION: I understand that tuition fees are due in full prior to the start of each month, term or course.

____ LATE OR UNPAID TUITION: If payment in full is not received when due, I agree to pay a late payment fee of 10,000 (JPY) per week that payment is not received. I understand that if my account is delinquent for more than one week, I may be asked to withdraw my child until my account is made current and the school cannot guarantee my child's spot will be held.

____ CHARGES FOR LATE PICKUP: I understand the times that my child's programs end. I understand that if I fail to pick my child up at the time my child's program ends, they will be automatically placed in the after care program and I will be charged an hourly rate for this program.

SECTION 2: PROCEDURES

____ ILLNESS: I understand that I will be notified if my child should become ill during the day, and that I will pick up my child promptly, or make arrangements for an authorized emergency contact to pick up my child upon notification. If my child is exposed to or contracts a contagious disease I agree to notify the school and not bring my child to school until the illness has been cleared by a medical professional.

____ MODEL RELEASE: I permit Louis Academy to take photographs of my child during school activities for the purpose of educating students, promoting the school, or promoting public education. The school may publish photographs of my child and/or samples of work done by my child in a variety of ways. The publications could include, but are not limited to, school newsletters (online and in hard copy), Louis Academy website, and content-sharing websites such as Facebook or YouTube, annual school magazines, and local newspapers. Published photographs and work will be viewable by third parties.



____ WITHDRAWAL: I understand that in order to process a withdrawal, a Change of Status Form must be submitted 30 days in advance. Moreover, I understand that if I choose to withdraw my child early from any program that all tuition fees paid will be forfeited. I also understand that after withdrawal, I must submit a new enrollment form and pay a new non-refundable registration fee at the current rate should I choose to re-enroll. All outstanding fees must all be paid prior to re-enrollment.

SECTION 3: HOLIDAYS, ABSENCES, AND CLOSINGS

____ HOLIDAYS: I understand that the school is closed on both national and school holidays, as noted on the school calendar that I have been given. I agree that I will not receive a refund, credit, or any other allowance for these holidays. If a holiday falls on a weekend it will be observed on the preceding Friday or following Monday, and no refund, credit, or allowances will be given for these observations.

____ ABSENCES/VACATIONS: I agree to inform the school immediately if my child will be absent from school. I understand that no allowances, credits, or refunds, or make up days for vacations will be allotted. I also understand that if I withdraw my child during a vacation, that I will be required to re-enroll my child and pay a new non-refundable registration fee.

SECTION 4: POLICIES

____ ALL POLICIES AND REGULATIONS: I understand that the above policies are not an all-inclusive list of policies, and that my child, my families members, authorized agents, and I are bound by national child care regulations, the Student & Parent Handbook, and all other company policies which may be modified at any time, with 7 days of advance notice. I also understand that my continued enrollment constitutes my acknowledgement of, and agreement to abide by all policies and national regulations.

Parent's Name

Date

Parent's Signature
