

Cornerstone Christian School PSP Tuition Schedule 2025-2026

Prices Effective April 1, 2025~ Tuition is per family

One Tuition Plan Due July 31, 2025	Two Tuition Plan Aug 1 & Nov 1, 2025	Ten Tuition Plan Aug 1, 2025- May1, 2026	Tuition Amount After August 1, 2025
\$750	\$400	\$85	\$850

Registration Per Student Due at the time of enrollment	\$185
Senior Graduation Fee Due (1/26)	\$150
HIGH SCHOOL On Campus Class Per Class Per Month Fee	1 class- \$95.00 2 classes-\$80.00 3 classes-\$70.00
On Campus Class Matriculation Fee	\$100/per class (one-time fee)
On Campus Class Technology Fee	\$50 (one-time fee)
Late Fee After the 10th of the Month	\$35
Insufficient Funds/ Returned Check Fee	\$35

Additional Fees	Sports Fees
<p>P.E. Uniforms (short & shirt combo) \$30</p> <p>CCS Spirit Shirt \$20</p> <p>CCS Baseball Hat \$40</p> <p>Other Costs: Parents should anticipate additional costs for special instructional supplies, locks, snacks/lunch, field trips, yearbooks, class pictures, Senior trips, Graduation, Grad-Nite, Prom/dances, Washington DC/New York trip, etc.</p> <p>CCS Athletic Wear also available—Prices Vary</p>	<p>Middle School</p> <p>Football \$425</p> <p>Volleyball \$425</p> <p>Basketball \$425</p> <p>Baseball/Softball \$425</p> <p>Cross-Country \$425</p> <p>Golf \$425</p> <p>High School:</p> <p>Football \$600</p> <p>Volleyball \$500</p> <p>Basketball \$500</p> <p>Baseball/Softball \$500</p> <p>Golf \$500</p> <p>Cross-Country \$500</p> <p>Co-Ed Soccer \$500</p> <p>Cheerleading –if interested contact Carolyn King for additional information</p> <p>**Spirit Pack is required for athletics price TBD by sport</p> <p>Volunteer Sports Opt-out Fee (Replaces Parent Volunteer Hours— 10 Hours) \$300</p> <p>Additional Sports Apparel and Fundraising Fees may apply</p>

**Withdrawal policy, you will be responsible for tuition and class fees for the 25/26 school year.
All fees are non-refundable**



CORNERSTONE
CHRISTIAN SCHOOL

Cornerstone Christian School

PSP NEW ENROLLMENT CHECK OFF LIST

- _____ Completed student(s) application (one packet per student)
- _____ Copy of Birth Certificate
- _____ Copy of Immunization Record (including proof of T-dap shot for grades 7-12) AND/OR Medical/Personal Exemption form signed by a Medical Physician.
- _____ Completed 2025-2026 CCS Emergency Card
- _____ Signed Pastor's Reference
- _____ Signed Health Policy
- _____ Signed Media Waiver
- _____ Signed Internet Use
- _____ Signed Understanding of Commitment & PSP Contract
- _____ Copy of CURRENT HSLDA
- _____ \$185.00 Registration Fee (**per student-Non-Refundable**) and choose a Tuition Payment plan.
- _____ Official SEALED Transcript (For every student who has had one or more semesters of high school)
- _____ Signed "Request For Student Records" form (found on website) **OR**

Families entering CCS who have been filing their own affidavit; AT TIME OF ENROLLMENT, you are required to submit their Cumulative File. These should include the following:

Course of Study Summary – 1 per school year per student

Attendance Record – 1 per school year per student

Report Card – 4th quarter or 2nd semester per school year per student

Course Descriptions – 1 per subject/course (for high school students)

Transcript – (For students who have completed 1 or more semesters of high school.)



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CHRISTIAN SCHOOL

Cornerstone Christian School

34570 Monte Vista Drive,
Wildomar, CA 92595
951-674-9381

NEW ENROLLMENT APPLICATION 2025-2026

(One per student)

Pay tuition~ 1 payment ☐ **2 payments** ☐ **10 payments** ☐

Date of Application _____

STUDENT INFORMATION

First, Middle & Last Name _____ Gender _____

Age _____ Birth Date ____/____/____ Grade Enrolling _____

Ethnicity _____

PARENT/GUARDIAN INFORMATION

Father's Name/Occupation _____

Phone (____) _____

Mother's Name/Occupation _____

Phone (____) _____

Mailing Address _____

Email Address _____

Student resides with: _____ (example: Grandparents)

Please explain any visitation and/or custody arrangements.

Are there any restraining orders and/or special circumstances?

If yes, list student's name(s) and grades they skipped or repeated. Briefly describe the circumstances.

Do any of your students have an IEP or a 504? ☐ Yes ☐ No

If yes, please provide a brief explanation. Please provide a copy of the IEP report upon enrollment.

Have any of your students ever been diagnosed with any type of learning disability? ☐ Yes ☐ No

If yes, please include a copy of all testing

Is it your intent to have your student(s) graduate from Cornerstone Christian School? ☐ Yes ☐ No

Why is your student(s) withdrawing from his/her current school?

Have any of your students ever been suspended, expelled or asked to withdraw from a school? ☐ Yes ☐ No

If Yes, list student's name(s). Please comment on circumstances.

Have any of your students had any problems with any type of drugs, alcohol, or tobacco? ☐ Yes ☐ No

If Yes, list student's name(s). Please comment on circumstances.

Last School Attended: _____
Name Address State Zip

Phone Number _____

Number of years you have home schooled _____

Name of person responsible to student's educational instruction (usually a parent): _____

Initial that you understand that all courses must be taught in English except foreign language: _____

Initial that you are qualified and able to teach your children: _____

Previously enrolled at CCS? ☐ No ☐ Yes If Yes, what Year? _____

Please provide a statement of your Christian Testimony:

Are you currently a member of HSLDA (Home School Legal Defense Association)? ☐ Yes ☐ No

If so, what is your renewal date? _____ please submit a COPY of your membership card.

You are required to join HSLDA. The only exceptions are families whose enrolled children are under 6 years of age or have reached age 18. (CCS HSLDA Group #299203.)

As a CCS student you have the opportunity to play sports. Please circle any you are interested in (additional fees apply)

Football ☐ Baseball ☐ Softball ☐ Basketball ☐ Cheerleading ☐ Volleyball ☐ Golf ☐

CCS offers a hybrid homeschool program where students (grade 9^h-12th) can attend up to three consecutive on campus classes (additional fees apply). Would you like more information? Yes No

Please note: All forms must be completed and application/registration fees paid in order for your enrollment to be valid.

Parent/Guardian signature: _____ ***Date:*** _____

Parent/Guardian signature: _____ ***Date:*** _____

(name of allergy)

2025-2026
EMERGENCY CARD



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Print Clearly

Student LAST NAME	Legal FIRST NAME	"NICKNAME"	<input type="checkbox"/> Male <input type="checkbox"/> Female
Home Address		City, State, Zip	
Home Phone # (if none, write "none")	Entering Grade	Date of Birth:	
Student Cell #		Student e-mail address:	
Father's Legal Name:		Work Phone # _____	
_____		Home Phone # _____	
Father's Email address:		Cell # _____	
Mother's legal Name:		Work Phone # _____	
_____		Home Phone # _____	
Mother's Email address:		Cell # _____	

Student lives with: _____ Both Parents 100% _____ Mother _____ % _____ Father _____ % _____ Guardian

Person to call FIRST: _____

EMERGENCY INFORMATION (Please notify CCS Office if this information changes.)

Please provide name, relationship, and phone of **local person(s)** other than parents to have your child picked up if he/she becomes ill at school and parents cannot be reached.

Students will only be released to those persons listed below.

Name	Relationship	Home Phone and/or Cell #
Name	Relationship	Home Phone and/or Cell #
Name	Relationship	Home Phone and/or Cell #
Name	Relationship	Home Phone and/or Cell #
Name	Relationship	Home Phone and/or Cell #

PASTOR REFERENCE

Student Name _____

ParentName _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

TO BE COMPLETED BY YOUR PASTOR

The above named student has applied for enrollment to Cornerstone Christian School. It is our intent to be selective in our admission process as we seek to provide a safe and loving Christ-centered environment where all students have the opportunity to grow and succeed. Please assist us in our selection process by completing the following information and returning it directly to the school at the address above. *All responses are kept confidential. Your input and rapid response are appreciated, as further enrollment consideration cannot proceed until this information is available.*

1. How long have you known the family? _____

2. How well do you know the applicant? _____

3. Parent's relationship to church: ☐ Member ☐ Non-member ☐ Active ☐ Non-active

4. Family's church attendance: ☐ Regular ☐ Occasional ☐ Seldom

5. Which family members evidence a personal relationship with Jesus Christ? _____

6. Does the applicant participate in any church activities? ☐ Yes ☐ No If yes, please describe: _____

7. Do you believe that in order to become a Christian and inherit eternal life, one must realize that he/she is a sinner (Romans 3:10, 23), believe that Jesus died for his/her sins (John 3:16; Romans 10:9-10) and ask Jesus Christ to come into his/her life and take away his/her sins (John 1:12) ☐ Yes ☐ No

8. Do you believe there is anything additional a person must do to receive salvation? ☐ Yes ☐ No
If yes, please explain _____

9. If you were administering a school, would you have any concerns about this applicant if he/she were applying at your school? ☐ Yes ☐ No If yes, please explain _____

What is your overall recommendation regarding the student: ☐ High ☐ Sufficient ☐ Hesitate ☐ No

Your Name (Print) _____ Signature _____

Position _____ Date _____

Name of Church _____ Phone _____

Address _____ City _____ State _____ Zip _____

Cornerstone Christian School

34570 Monte Vista Drive

Wildomar, CA 92595

Office 951.674.9381

Fax 951.674.8462

HEALTH POLICY 2025-2026



CCS staff members expect parents and guardians to keep students home when certain conditions exist. This policy exists in order to protect the well-being of our students and staff, maintain a safe environment where their needs can be met, and attempt to minimize the spread of illness. You will be called to pick up students when observed by the teacher or the office staff to exhibit any of the symptoms listed below.

PLEASE NOTE: All students MUST have an emergency card on file

Students must have their immunizations up to date and on file at the school office. The only exceptions are: Being otherwise advised by a physician, or if parents object to immunizations based on personal beliefs. Written statements by the physician or parent must then be on file in the school office.

Please read the following policy carefully.

- Normal temperatures are generally 98.6 degrees orally and 97.6 axillary (under the arm). If a student registers a temperature higher than 100.0 orally or 99.7 axillary, we will consider this to be fever which is likely to be contagious and we will expect you to keep him/her home.
- When there is vomiting, we will expect you to keep students home.
- If a student has an unexplained rash, we will expect you to keep him/her home. For re- admittance to school, a doctor's note will be required stating that the student is not contagious. We will admit the student providing the rash is not making him/her sick and excessively uncomfortable.
- If a student has significant symptoms of respiratory illness (thick colored mucus from eyes or nose, serious cough, wheezing chest, red runny eyes or crusty eyes, sore throat or earache) we will expect you to keep him/her home.
- For infections requiring a doctor's prescription, please keep students home 24 hours after beginning an antibiotic.
- For all other illnesses, students may return to school if free from symptoms for 12 hours providing that behavior indicates that he or she is feeling well.
- If a student contracts a communicable disease, please notify the school office so that we may let all parents know that others may have been exposed. A doctor's release is required before the student may return to school.

Our staff has been trained in First Aid and CPR. When a student has been injured, we evaluate the situation on a case-by-case basis. When appropriate, we apply ice packs to bumps; topicals and adhesive bandages to cuts and scrapes, etc. If more serious, we will notify the parent and complete an Accident Report.

ON CAMPUS AND EMERGENCY HEALTH PROCEDURES

- If a student is injured on campus, he/she should report this injury to a teacher, administrator, support staff, or before/after school supervisor immediately.
- If a student becomes ill, he/she should request a hall pass from his/her teacher or support staff, and proceed directly to the school office.
- If a student is taking medication of any kind, the parent must bring the medication to the school office. The parent will then complete a brief Student Medication Form, which will be kept on file in the office. The parent should also write a note to the student's teacher letting them know when the student should be sent to the office for his/her medicine. No student is allowed to take medication of any kind without adult/staff supervision. No student may share any medication with any other students.
- If a student is advised to leave campus, the parent will be contacted. When the parent, or other authorized adult, comes to pick up the student, they will be asked to sign out on the Sign-Out Sheet.

Student Name: _____ Parent Signature: _____ Date: _____



CORNERSTONE
CHRISTIAN SCHOOL

Media Waiver and Release

2025-2026

I consent to my child being photographed, interviewed and/or videotaped by representatives of Cornerstone Christian School (CCS) and media outlets (magazine, newspaper, television, radio stations, etc.).

Cornerstone Christian uses photographs of students in various publications to share information about CCS with the community. Any information or images obtained from those activities may be reproduced by Cornerstone Christian School and/or the public media for the use in advertising, publicity or educational activities, including but not limited to the Cornerstone Christian websites, advertisements, yearbooks, social medias, publications, videos, posters, banners, flyers, bulletin boards, print and television news. The full name of your child will not be disclosed in any materials without further approval.

I hereby waive any claims I may have, and release CCS and its representatives from liability of claims arising out of such activities.

- ☐ Yes, my child may be photographed, interviewed or videotaped for classroom/observation/media use.
- ☐ No, my child may not be photographed, interviewed or videotaped for media use.

Student Name: _____ Grade: _____ Age: _____

Verification:

I verify that the information provided on this Media Waiver and Release is accurate and current, and that I am the legal parent/guardian of the above student.

Signature of Parent/Guardian

Printed Name

Date

Signature of Student (18 years or older)

Printed Name

Date



INTERNET USE CONTRACT 2025-2026

Student Name _____ Date _____

Cornerstone Christian School offers internet access for student use. This document contains the Use Policy for student use of the school's system. The school internet system has been established for a limited educational purpose. The term "educational purpose" includes classroom activities, career development, and limited high-quality self-discovery activities. CCS has the right to place reasonable restrictions on the material that student's access or post through the system. Students are expected to follow the rules set forth in the Student Handbook. All students will have access to the internet while on campus.

Parents and Students: Please read and initial each category.
Complete the reverse side and sign.
Thank you.

Personal Safety: You will not post personal contact information about yourself or other people. Personal contact information includes your address, telephone, school address, work address, etc. You will not agree to meet with someone you have met online. You will promptly disclose to your teacher or other school employee any message you receive that is inappropriate or makes you feel uncomfortable. **Parent initials** _____ **Student initials** _____

Illegal Activities: You will not attempt to gain unauthorized access to the system or to any other computer system through the system or go beyond your authorized access. This includes attempting to log in through another person's account or access another person's file. These actions are illegal, even if only for the purpose of "browsing." You will not make deliberate attempts to disrupt the computer system or destroy data by spreading computer viruses or by any other means. These actions are illegal. You will not use the system to engage in any other illegal act, such as arranging for a drug sale or the purchase of alcohol, engaging in criminal gang activity, threatening the safety of others, etc. You will not use the system for commercial purposes. This means you may not offer, provide, or purchase, products or services through the system. You will not use the system for political lobbying. You may use the system to communicate with elected representatives and to express your opinion on political issues. **Parent initials** _____ **Student initials** _____

System Security: You will immediately notify a teacher or the system administrator if you have identified a possible security problem. Do not search for security problems because it may be construed as an illegal attempt to gain access. You will avoid the inadvertent spread of computer viruses by following the school virus protection procedures when downloading software. **Parent initials** _____ **Student initials** _____

Inappropriate Language: Restrictions against inappropriate language apply to public messages, private messages and material posted on web pages. You will not use obscene, profane, lewd, vulgar, rude, inflammatory, threatening, or disrespectful language. You will not post information that could cause damage or a danger of disruption. You will not engage in personal attacks, including prejudicial or discriminatory attacks. You will not knowingly or recklessly post false or defamatory information about a person or organization. You will not harass another person. Harassment is persistently acting in a manner that distresses or annoys another person. If you are told by a person to stop sending them messages, you must stop. **Parent initials** _____ **Student initials** _____



INTERNET USE CONTRACT
2025-2026
Page 2

Student Name _____ Date _____

Respecting Resource Limits: You will use the system only for educational and career development activities. If you must download a file, you will download the file at a time when the system is not being heavily used and immediately remove the file from the system computer to your personal computer. Teacher approval is required to download all files. You will not post chain letters or engage in "Spamming." Spamming is sending an annoying or unnecessary message to a large number of people. You will subscribe only to high quality discussion group mail lists that are relevant to your education or career development.

Parent initials _____ **Student initials** _____

Plagiarism and Copyright Infringement: You will not plagiarize work that you find on the internet. Plagiarism is taking the ideas or writing of others and presenting them as if they were yours. You will respect the rights of copyright owners. Copyright infringement occurs when you inappropriately reproduce a work that is protected by a copyright. If a work contains language that specifies appropriate use of that work, you should follow the expressed requirements. If you are unsure whether or not you can use a work, you should request written permission from the copyright owner. Copyright law can be very confusing. If you have questions, ask a teacher.

Parent initials _____ **Student initials** _____

Inappropriate Access to Material: You will not use the school's system to access material that is profane or obscene, that advocates illegal acts, or that advocates violence or discrimination towards other people (hate literature). If you mistakenly access inappropriate information, you should immediately tell your teacher or another school employee. This will protect you against a claim that you have intentionally violated this policy. Your parents should instruct you if there is additional material that they think would be appropriate for you to access. The school fully expects that you will follow your parents' instruction in this matter. **Parent initials** _____ **Student initials** _____

Your Rights Using the School System: Your right to free speech as set forth in the school disciplinary code applies also to your communication on the internet. The school's system is considered a limited forum, similar to the school newspaper, and therefore the school may restrict your speech for valid educational reasons. You should expect only limited privacy in the content of your personal work on the school system. Routine maintenance and monitoring of the system may lead to discovery that you have violated this policy, the school's policies, or the law. The investigation will be reasonable and related to the suspected violation. Your parents have the right at any time to request to see the contents of your work.

Parent initials _____ **Student initials** _____

Due Process: The school will cooperate fully with local, state or federal officials in any investigations related to any illegal activities conducted through the school's system. In the event there is a claim that you have violated this policy, school policies, or the law in your use of the system, you will be provided with a written notice of the suspected violation and an opportunity to present an explanation before a site administrator. In addition to restrictions or elimination of your use on the school's system, other disciplinary consequences may also be applied.

Parent initials _____ **Student initials** _____

Limitation of Liability: The school makes no guarantee that the functions or the services provided by or through the school system will be error-free or without defect. The school will not be responsible for any damage you may suffer, including but not limited to, loss of data or interruptions of service. The school is not responsible for the accuracy or quality of the information obtained through or stored on the system. The school will not be responsible for the financial obligations arising through the unauthorized use of the system. **Parent initials** _____ **Student initials** _____



CORNERSTONE
CHRISTIAN SCHOOL

Cornerstone Christian School

PARENT/GUARDIAN UNDERSTANDING OF COMMITMENT

Please read and sign this document and turn it in with your completed enrollment packet.

I understand that I will be in contact with the PSP coordinator on a regular basis.

My children recognize my God-given authority in our home as both parent and educator.

My family attends church regularly (3 times a month) and will return a signed Pastor's Reference (New families only)

I understand paperwork is due on set dates throughout the academic year. The dates are listed under the "forms" tab on the school website. If I fail to turn in my student(s) required paperwork on time, I understand I will accrue a \$5 late fee for each sheet of missing paperwork.

I understand that the paperwork I turn in for my student(s) are legal documents and must be completed in blue or black ink or typed for grades K-8. All paperwork for grades 9-12 must be typed.

I realize educating my children through CCS is my responsibility, I will not place blame on CCS for failing in that purpose.

I agree to keep HSLDA membership current as part of my mandatory requirement for enrollment.

I understand that achievement testing is mandatory every other academic year. Additional fees apply to all tests.

I understand it is my responsibility to know the information in the CCS PSP/Homeschool Handbook and follow the policies therein. By signing this form, I understand the handbook can be found on the CCS website and have read it.

I will be responsible for my student's actions at school functions i.e. sporting events, dances, chapel, fieldtrips, etc.

I understand that if my student(s) take classes or play sports at CCS, we will abide by all policies and procedures located in the CCS handbook which can be found on the website.

I understand my student must complete 20 hours of community service for every year they are enrolled with CCS as a high schooler. The form is available on the school website under "Homeschool/PSP" and must be completed and turned by the end of each school year.

If CCS payments or paperwork is not current, I understand that my student will not be allowed to participate in sports practices or games until payments are made and paperwork is current.

If CCS payments or paperwork is not current, I understand that my student will not be allowed to participate in sports practices or games until payments are made and paperwork is current.

I understand that my student must maintain at least a 2.0 GPA prior to and during the sports season, curriculum must be pre-approved, and PSP athletes are required to have a minimum of four graded subjects per semester of eligibility.

I understand registration is required at time of re-enrollment/enrollment. I understand that tuition is to be paid on the first of the month Aug-May. I also understand that there are absolutely no refunds on registration and tuition fees. I understand and will fulfill my financial commitment to pay for enrolled student(s) as set forth in the tuition contracts when student enrolls in day school class(es)

I understand my high school student has the option to take up to 3 consecutive classes on the CCS campus. Each on campus class has an additional per month fee plus a one-time matriculation fee and technology fee. There is no refund on any "on campus class" fees. If your student takes on campus classes, he/she must sign in and out in the office every day. For safety purposes, your student is dismissed through the office. He/she must wait in the office to be picked up. Please drop off and pick up your student within 10 minutes of the start and of his/her first/last on campus class.

I have read the foregoing Understanding of Commitment and fully understand what is expected of me. I am committed to uphold these standards and am fully committed to my role as a parent and home educator with CCS. I also understand that agreeing with and adhering to this form and the CCS Handbook and Athletic Handbook (if applicable) is a condition of my family's enrollment and that any violations are grounds for my family's expulsion. It is understood that the service of CCS is engaged by mutual consent and that either the school or I reserve the right to terminate any or all services at any time by written notification. It is the parent's responsibility to inform their student(s) so they understand the Dress Code, Code of Conduct and School Policies outlined in the CCS Handbook.

Parent/Guardian Signature _____

Print Name _____ Dated _____

Parent/Guardian Signature _____

Print Name _____ Dated _____