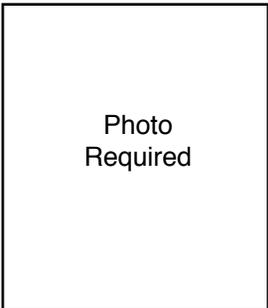




LYMAN WARD MILITARY ACADEMY

POD 550, 174 Ward Circle
Camp Hill, Alabama, USA 36850
1-256-281-3295 FAX: 1-256-896-4661
admissions@lwma.org http://lwma.org



APPLICATION CONTRACT FOR ADMISSION

Into the _____ Grade, for the Full Spring Summer term of the 20____ School Year

1. Candidates Information

Full Name: _____ Social Security Number: _____

Height: _____ Weight: _____ Hair Color: _____ Eye Color: _____ Race: _____

City: _____ State: _____ Zip: _____ Country of Citizenship: _____

Religious Preference: _____ Age: _____ Date of Birth: _____

2. Parental and Guardian Information

Are both parents living: Yes No

Parents are: Married Divorced Separated Other

If parents are not married attach documentation of custodianship and/or explanation.

Primary Contact: Father Mother Guardian

Father: _____ Occupation/Title _____

Address: _____

Home Phone: _____ Cell Phone: _____

Work Phone: _____ Email: _____

Mother: _____ Occupation/Title _____

Address: _____

Home Phone: _____ Cell Phone: _____

Work Phone: _____ Email: _____

If there is a guardian, explain relationship: _____

Guardian: _____ Occupation/Title _____

Address: _____

Home Phone: _____ Cell Phone: _____

Work Phone: _____ Email: _____

Emergency Contact and Phone: _____ Relationship: _____

3. Academic Information

Current School: _____

Address: _____ Phone: _____

City, State & Zip: _____ Fax: _____

Has the candidate ever been dismissed from school: Yes No

Has the candidate ever taken Gifted, IEP, or Special Education Classes: Yes No

If yes was selected for either of the above two questions, please attach an explanation.

Does the candidate have any Junior ROTC experience: Yes No

4. Extracurricular Activities

In what sports or other extracurricular activities has the candidate participated: _____

In what sports or other extracurricular activities does the candidate have an interest: _____

Band Experience: Yes No Musical Instruments: _____

What are the candidates special gifts, interests, or talents: _____

Sea Cadet, Civil Air Patrol, Boy Scouts, Venture Scouts experience: Yes No

Has the candidate ever been away from home for an extended period of time: Yes No

If yes please explain _____

5. Personal Conduct and Citizenship

Candidate's awards or accomplishments: _____

Candidate's future goals: _____

Hardest thing the candidate has ever accomplished: _____

Has the candidate ever been suspected of using, treated for, or tested positive for any substance abuse, drugs, narcotics: Yes No

Has the candidate ever been involved with the Juvenile or other Authorities: Yes No

If yes was selected in any of the above two questions, please attach an explanation with contact information and a disclosure release for them to speak with LWMA officials.

6. Medical History

Is there any reason the candidate should not take part in physical training or athletics:	<input type="radio"/> Yes <input type="radio"/> No
Is the candidate taking any medicine:	<input type="radio"/> Yes <input type="radio"/> No
Does the candidate have any physical weakness:	<input type="radio"/> Yes <input type="radio"/> No
Does the candidate have any mental or emotional problems:	<input type="radio"/> Yes <input type="radio"/> No
Has the candidate required professional counseling or psychiatric care:	<input type="radio"/> Yes <input type="radio"/> No
Is the candidate allergic to any medications:	<input type="radio"/> Yes <input type="radio"/> No

If yes was selected in any of the above medical history questions, please attach an explanation.

7. Permission Request

Permission is granted for the candidate to ride in a private automobile belonging to a senior cadet at the Academy for the purpose of coming home for leave and returning to LWMA:	<input type="radio"/> Yes <input type="radio"/> No
Permission is granted for the candidate to ride with another parent in a private automobile for the purpose of coming home for leave and returning to LWMA:	<input type="radio"/> Yes <input type="radio"/> No
Permission is granted for the candidate to visit with another cadet and parent on a day pass:	<input type="radio"/> Yes <input type="radio"/> No
Permission is granted for the candidate to participate in Junior or Varsity Sports: Football, Cross Country, Basketball, Soccer, Baseball, Track, Golf	<input type="radio"/> Yes <input type="radio"/> No

8. Other

Have any relatives of the candidate ever attended LWMA or SII, if so who and when:

How did you find out about Lyman Ward?

Alumni: _____ Internet: _____

Current Cadet/Family: _____ Lived in Area: _____

Newspaper: _____ School Directory: _____

Magazine: _____ Other: _____

9. Request more Information

Summer School Adventure Camp Military Leadership Camp

10. Application Checklist

All Explanations Custodianship Documentation

All Application Document Documents Application Fee

(\$250 for new students, \$150 for returning cadets).

11. Contract and Enrollment Agreement

I/We the undersigned, hereby enroll _____ as a student at Lyman Ward Military Academy (LWMA) for the school year beginning in _____ and agree to pay all tuition, uniform expenses, and related fees according to one of the payment plans detailed in the Academy's contract folder and detailed on the Academy website. I/We understand that the non-refundable application fee is required with this enrollment agreement and that the application fee acts as a deposit. I/We acknowledge that the Academy, to maintain services and plant facilities and to meet continuing expenses such as faculty salaries, must be assured that it will receive required income from students tuition. For that reason I/We hereby agree to pay the full year's tuition and fees for the above-named student's enrollment in accordance with one of the four payment options (A,B,C, or D). It is further understood that the school will dismiss a student for non-payment, and will withhold credits, transcripts, recommendations and diploma until the account has been settled in full. I/We recognize the Academy's right to dismiss (without a tuition reduction or remission) any student whose conduct is deemed by the Academy's Administration to be detrimental to the discipline, reputation, or well-being of the Cadet Corps. I/We understand that the basis for a conduct dismissal can include, but is not limited to, egregious violations of the Cadet Honor Code (such as stealing), an accumulation of excessive demerits for violations of Cadet Regulations, or a single act (on or off campus) that the Administration deems detrimental to the discipline of the Cadet Corps or the Academy's reputation. I/We understand and agree that if the above-named student is voluntarily withdrawn or dismissed from the Cadet Corps, I/we will remain obligated to pay up to the entire school year's tuition in accordance with the Academy's Withdrawal/Dismissal and Refund Policy. Official withdrawal requires notification in writing. Scholarship funds, grants, and/or fees are always non-refundable.

Withdrawal/Dismissal during first 7 days.....All fees and uniform costs are to be paid along with \$2,000 in tuition/room/board
Withdrawal/Dismissal during first 14 days.....All fees and uniform costs are to be paid along with \$4,000 in tuition/room/board
Withdrawal/Dismissal during first 42 days.....All fees and uniform costs are to be paid along with \$6,000 in tuition/room/board
Withdrawal/Dismissal after the first 42 days.....All fees, uniform costs, and tuition/room/board are to be paid in full

I/We agree that photographs, videos, stories of my student may be used in school promotional materials, publications, advertisements, and commercials or other Academy purposes. I/We authorize the Academy to take any medical steps necessary to care for my student. I/We understand that the undersigned are responsible for all debts incurred the student including medical. I/We agree to be bound by the conditions of enrollment expresses in this agreement and to support the Academy in the administration of its policies and in the enforcement of cadet regulations. LWMA believes that a positive and constructive working relationship between the Academy and a student's parents (or guardian) is essential to the fulfillment of its mission. Thus, LWMA reserves the right not to continue enrollment or not to re-enroll a student if the Academy reasonably concludes that the actions of a parent (or guardian) make such a positive and constructive relationship impossible, or otherwise seriously interfere with the Academy's accomplishment of its educational purposes. I/ We authorize LWMA to release the above-named student's academic transcripts to any college or university to which he may apply for admission. I/We understand and agree that the Academy may withhold the transcripts and/or records of any student whose tuition account is in arrears. I/We further understand and agree that my/our failure to meet tuition payment obligations may provide cause for the student's dismissal from the Academy. LWMA makes no warranties or guarantees with respect to the individual educational and academic achievement of any particular student. No promises are made that any student will reach a particular level of academic achievement, although the Academy strives to assure that the educational and developmental needs of every student are addressed by its programs. This contract shall be governed by the laws of the State of Alabama. In the event of non-payment of tuition or fees, any suit to effect collection shall be brought in the general district or circuit court of Tallapoosa County, Alabama, and I/we agree to venue and jurisdiction in Tallapoosa County, Alabama. The undersigned agree to reimburse the Academy for all costs incurred in collecting unpaid tuition and fees, including court costs, and attorney's fees. In signing this contract I certify that the information in this application is true and complete and that there are no disciplinary actions, criminal charges or juvenile proceedings pending that I have not disclosed. I understand that any material falsification or omission may be cause for immediate dismissal and forfeiture of all refunds.

Signature(s) of Parent(s) or Guardian(s) Financially Responsible for Cadet:

_____ Date ____/____/20____ SSN: _____-____-_____

_____ Date ____/____/20____ SSN: _____-____-_____

CANDIDATE'S PLEDGE: If accepted as a member of the Corps of Cadets at Lyman Ward Military Academy, I solemnly promise to behave as a gentleman and to cooperate with the school authorities to the best of my ability.

Candidate's Signature

12. Payment Plan (choose one)

A B

Admissions Director: _____ Date ____/____/20____