



Florida League of Christian Schools

P. O. Box 24687
Lakeland, FL 33802

Phone (863)683-5726
www.flocs.org



Religious Exempt Verification Form

If your center is seeking Religious Exemption, please complete the following form in its entirety and return with the membership form. You will be mailed a membership form as well as a Preschool Certification upon approval.

Center Information

Full Legal Name of Center (as it appears on SunBiz.org)

Preschool Street

Preschool City, State and Zip

Preschool Director

Church Information

Full Legal Name of Center (as it appears on SunBiz.org)

Preschool Street

Preschool City, State and Zip

Senior Pastor Responsible for Center

MEMBERSHIP AGREEMENT

The Director AND Pastor MUST initial each item below:

The Preschool is an integral ministry of our church.

The Center is legally a "non-profit" entity.

The Center will comply with the FLOCS Policies and Procedures Manual.

The Church Statement of Faith is NOT in disagreement with the FLOCS Statement of Faith.

We understand that all fees are non-refundable.

We agree to comply with local and state regulations governing our center.

Director Initials

Pastor Initials

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Please complete this form in its entirety and return with all requested documentation and fees to the FLOCS state office. Items below are required for organizations seeking Certification for Religious Exemption with FLOCS.

- | | | |
|--|--|--|
| <input type="checkbox"/> Membership Application | <input type="checkbox"/> Fees | <input type="checkbox"/> Self Evaluation |
| <input type="checkbox"/> Insurance with appropriate coverage | <input type="checkbox"/> Verification of fire inspection | <input type="checkbox"/> Copy of floor plan if there have been changes |

Please Note: A Statement of Annual Compliance for Religious Exemption will be returned to your center with your new certificate. It is your responsibility to provide a copy of each to your local/state licensing agent upon receipt of them.

Director Signature

Date

Pastor Signature

Date