

Date Received _____ Check# _____ Amount _____

FIRST BAPTIST CHRISTIAN ACADEMY PRESCHOOL & MDO
Application for Admission
2018-2019

MDO2's/2 Days _____ 3Day _____ K3/5Days _____ (State Approved)
MDO3's/2 Days _____ 3Day _____ K4/3 Days _____ K4/5Days _____ (State Approved)

STUDENT INFORMATION:

Student's Name: _____ Nickname: _____

Address: _____

Date of Birth: _____ Age: _____ Sex: _____ Race: _____

FAMILY INFORMATION:

Mother: _____	Father: _____
Home Address: _____	Home Address: _____
City, State, Zip: _____	City, State, Zip: _____
Church: _____	Church: _____
Contact #: _____	Contact #: _____
Contact #: _____	Contact #: _____
Email: _____	Email: _____
Occupation: _____	Occupation: _____
Business Phone: _____	Business Phone: _____

If there is a separation or divorce with whom does the student reside: _____
Doctor's Name: _____ Phone Number: _____
List All Allergies _____
Is student potty trained? Yes _____ No _____

Emergency/Transportation Contacts:

These are people who have permission to pick up your student from FBCA and would be contacted in case of emergency. **These people are in addition to parents.**

Please list the following: Name, Relationship to Student, and Phone Number

1. Name/Relationship _____ Phone# _____
2. Name/Relationship _____ Phone# _____
3. Name/Relationship _____ Phone# _____

List other siblings who attend FBCA and grade _____

Parent Signature

Date

For New Students Only:

Previous School _____ Phone #: _____
Has your child ever been expelled or asked to voluntarily withdraw from any previous school? _____
Please list any learning disabilities or IEPs: _____



PHOTO CONSENT FORM

Parent Consent Form for Photography, Media, and Website Images

During the school year, there are occasions when photographs of your child may be taken by teachers of the school, other students, staff, or professional photographers. Your authorization to use photo(s) of your child in publications (brochures, programs, school website, school Facebook) is requested. Please sign the photo usage section to provide the school with your consent for photo usage. Signing this form will be deemed as consent for **FBCA** to allow your child to be included in only the specified school year of 2018-2019. Should circumstances change during the year, please notify FBCA administration.

Online Photo Usage (Please circle yes or no for all categories)

Photo(s) allowed on school website: **YES** **NO**

Photo(s) allowed on school Facebook: **YES** **NO**

Photo(s) allowed in print media: **YES** **NO**

Name of Student (please print) _____

Name of Parent or Guardian (please print) _____

Signature of Parent or Gaurdian _____ **Date** _____

Medical Consent

I hereby authorize and consent to the administration and staff, the care of my child, _____, during the time that he or she is in the school facility or a school sponsored event. In the event that I (or alternate contacts) cannot be reached in an emergency, I authorize medical care to be given to my child. I further acknowledge that I have read the contents of this registration

Parent _____ **Date** _____



First Baptist Christian Academy does not discriminate admission on the basis of race, color, national and ethnic origin.

**FIRST BAPTIST CHRISTIAN ACADEMY
PRESCHOOL & MDO
STEPS TO ENROLLMENT:**

FOR RETURNING STUDENTS: Please completely fill out and sign the following forms:

- Registration
- Photo consent
- Medical Consent
- Authorization Agreement for Pre-Authorization Payments (Only if you have new acct. information)

If student has received any immunizations in the last year, please provide updated immunization records.

FOR NEW STUDENTS:

Please completely fill out and sign the following forms:

- Registration
- Photo Consent
- Medical Consent
- Authorization Agreement for Pre-Authorization Payments

The following documents must also be received:

- Copy of Birth Certificate
- Up-to-Date Immunization Records

*Tuition is paid by automatic draft unless paid in full by August 1. In order to complete the registration process the Authorization Agreement for Pre-Authorization Payments (Automatic Draft) Form **must** be received.

FOR ALL STUDENTS:

Enrollment is based on age as of September 30, 2018. Registration will not be processed until all items are received, forms signed and the non- refundable registration fee has been paid.



TUITION AND FEES FOR 2018-2019

CLASS	REGISTRATION (Per family)	INSTRUCTIONAL	Capital Improvement (Per Family)	TUITION Paid Monthly Aug. – May
MDO 2 & 3 yrs. (Tue-Thu) A BEKA Curriculum	\$250 by 3/15/18 after 3/15/18 \$300 for first child \$25 for each additional child	\$140 Bank drafted 6/21/18	\$150 Bank drafted 7/26/18	\$290
MDO 2 & 3yrs. (M-W-F) A BEKA Curriculum	\$250 by 3/15/18 after 3/15/18 \$300 for first child \$25 for each additional child	\$210 Bank drafted 6/21/18	\$225 Bank drafted 7/26/18	\$330
K4 (M-W-F) A BEKA Curriculum	\$250 by 3/15/18 after 3/15/18 \$300 for first child \$25 for each additional child	\$210 Bank drafted 6/21/18	\$225 Bank drafted 7/26/18	\$330
K3 & K4 (M thru F) State Approved A BEKA Curriculum	\$250 by 3/15/18 after 3/15/18 \$300 for first child \$25 for each additional child	\$350 Bank drafted 6/21/18	\$350 Bank drafted 7/26/18	\$415

****Family Plan Discount for multiple children in same family (first child full tuition, 10% discount for 2nd child, 20% for 3rd, and 50% for 4 or more children).**

Tuition Fees will be automatically deducted from checking accounts on the 3rd or 17th of each month or semi-monthly on the 3rd and 17th (Aug.-May).

NOTE: A CHILD'S NAME WILL NOT BE PLACED ON A CLASS LIST UNLESS THE REGISTRATION FORM AND REGISTRATION FEES ARE RECEIVED IN FULL.

Age Requirements

Children entering Preschool (K3) must be 3 yrs. old on or before Sept.30th and **MUST** be potty trained. Children entering Preschool (K4) must be 4 yrs. old on or before Sept.30th.

Adjustment Period

Children enrolled in the program will be given a three-week adjustment period. If at the end of that period the child has not adjusted to the program but has prolonged crying, tantrums, etc., that child will be dismissed from the program. **Note: Instructional fees are non-refundable.**

AUTHORIZATION AGREEMENT FOR PRE-AUTHORIZED PAYMENTS

CONSUMER NAME(S): _____

I (we) hereby authorize First Baptist Christian Academy, hereinafter called COMPANY, to initiate debit entries to my (our) checking account below and the depository named below, hereinafter called DEPOSITORY, to debit the same to such account.

DEPOSITORY NAME: _____

BRANCH: _____

CITY _____ STATE _____ ZIP _____

TRANSIT / ABA NUMBER: _____

ACCOUNT NUMBER: _____

This authority is to remain in full force and effect until COMPANY and DEPOSITORY has received written notification from me (or either of us) of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it.

CONSUMER NAME (S) _____
(PLEASE PRINT)

DATE: _____

SIGNED: _____ SIGNED: _____

_____ Please deduct on the 3rd of each month.

_____ Please deduct on the 17th of each month.

_____ Please deduct 1/2 on the 3rd & 1/2 on the 17th of each month.