

**** Please print. ****

STUDENT INFORMATION

First Name: _____

Middle Name: _____

Last Name: _____

Birthdate: Y _____ M _____ D _____ Entering Grade: _____

Gender: M _____ F _____

PARENTAL INFORMATION

Father's information

First Name: _____

Last Name: _____

Occupation: _____

Employer: _____

Email Address: _____

Marital Status: M _____ D _____ W _____ Lives with children: Y _____ N _____

Phone: (_____) _____ Cell: (_____) _____

Work: (_____) _____ Ext: _____

Mother's information

First Name: _____

Last Name: _____

Occupation: _____

Employer: _____

Email Address: _____

Marital Status: M _____ D _____ W _____ Lives with children: Y _____ N _____

Phone: (_____) _____ Cell: (_____) _____

Work: (_____) _____ Ext: _____

HOME ADDRESS

Apt.# _____ Street: _____

City: _____ Province: _____

Postal Code: _____ Country: _____

MAILING/OTHER ADDRESS

Complete only if different from home address.

Street/PO Box#: _____

City: _____ Province: _____

Postal Code: _____ Country: _____

EMERGENCY CONTACT INFORMATION

Person to contact if school is unable to contact parent(s):

First Emergency Contact

First Name: _____

Last Name: _____

Relationship to child: _____

Phone: (_____) _____ Cell: (_____) _____

Work: (_____) _____ Ext: _____

CUSTODY

Are there special instructions to be noted regarding custody of students? N _____ Y _____ (if YES, please explain.):

PERMISSION

School Trips: My child may participate in school related off campus trips that are supervised by a faculty member. Such as: Sports, Field Trips, Skating etc. **Permission given:** Y____ N____

Image Permission: My child's picture, voice, video and/or work may be used by FCA for promotional materials.
Permission given: Y____ N____

Lunch hour Permission - Grade 6 – 12 Only: My child may leave the FCA school grounds between the hours 12:00 noon – 1:00 pm. I (we) recognize that my child will be unsupervised by school faculty upon leaving the school grounds.
Permission given: Y____ N____ Does not apply____

STUDENT WITHDRAWAL POLICY

Students withdrawals must be made by the parent in person through the Principal's office. Official withdrawal forms will be processed and the necessary signatures obtained.

A Family who withdraws their children after September 30 will be charged an additional 2 months tuition payments.

NOTE: Records will not be released until all bills are paid in full, and all textbooks and materials have been returned.

By signing my name I am signifying that I have read this notice. Note: Signature is required by both parents.

Parents, please initial here to signify that you have read and understand this policy:

Initial

Initial

ANNUAL REGISTRATION FEE

2020 - 2021 School year

The registration fee is as follows:

Before January 31 \$100.00/student
After January 31 \$150.00/student

Registration fee is not refundable.

TUITION FEE

2019-2020 Fees & Tuition

Tuition fee	(Monthly amount is over 12 months)
Kindergarten	\$3384 (\$282/mth)
Grades 1-12	
1st child	\$5100 (\$425/mth)
2nd child	\$3876 (\$323/mth)
3rd & Subsequent Children	\$3132 (\$261/mth)

HOW WILL YOU PAY TUITION FEES?

- One time payment (cheque) (Due July 1) Bi-annual payment (2 Post-dated cheques July 1 and January 1) Monthly Payment (Paid over 12 months: July – June)
Please complete DW/PAD form.

SIGNATURES (Signature of both parents is required.)

As parents, we give our full support to the teachers, programs and policies of the school. We pledge to pay the tuition payments regularly and on time.

Signature

Date

Signature

Date