



Washtenaw Christian Academy
7200 Moon Road
Saline MI 48176
2016-2017 NEW ENROLLMENT FORM

Father's Information

Name _____
 Address _____
 City _____ State _____ Zip _____
 Phone _____
 Email _____
 Employer _____
 Occupation _____
 Church _____
 Is the Student(s) living with you? Yes _____ No _____

Mother's Information (if differs from father)

Name _____
 Address _____
 City _____ State _____ Zip _____
 Phone _____
 Email _____
 Employer _____
 Occupation _____
 Church _____
 Is the Student(s) living with you? Yes _____ No _____

STUDENT INFORMATION

STUDENT(S) NAME	BIRTHDAY MO/DAY/YEAR	M/F	GRADE ENTERING/Preschool Class
1.			
2.			
3.			
4.			
5.			

Financial Agreement Statement

In order to complete the enrollment of my children listed above, I fully agree with the following statements:

- A registration fee is required and due with this form. This fee is non-refundable. On or before April 15th the fee is \$300 for each student. Beginning April 16th the fee is \$350 per student (K-12). Registration fee for preschool is \$75. . The maximum fee per family through April 15th is \$600. **There is no family cap beginning April 16, 2016.**
- I understand I must **choose only one** of the following tuition payment plans for the new school year:
 - Pay total in full to WCA by July 15th with no fee from F.A.C.T.S.
 - Pay half of tuition by July 15th and other half of tuition by Jan 5th or 20th with an additional \$10 fee from F.A.C.T.S. Please select (circle) either the 5th or 20th as your payment date.

- 12 equal payments which are directly deducted from my bank account by F.A.C.T.S. with an additional \$41 yearly fee. Please select (circle) either the 5th or 20th as your payment date.
- 10 equal payments (Sept.-Jun.) which are directly deducted from my bank account by F.A.C.T.S. with an additional \$41 yearly fee. Please select (circle) either the 5th or 20th as your payment date.
- 3. I agree to pay WCA any miscellaneous charges that my student(s) incur, as outlined in the handbook – i.e. yearbook, various testing fees, etc.
- 4. A \$25 charge will be added to my account for all NSF checks.

Total from Tuition and Fees Worksheet _____

Planned giving to WCA in conjunction with F.A.C.T.S. program

Tuition payments provide approximately 80% of the total funding of the school. Additional contributions are needed in order to support the budget, provide improved compensation for staff and improve the overall extent of our programs. We ask that you prayerfully consider an additional contribution to the school. Families are asked to consider a contribution of \$50/month or more to support our facility. This can be included in your monthly F.A.C.T.S payment. All contributions are tax deductible.

Planned giving to WCA (___ months * \$ ___ /mo)\$ _____

The Financial Agreement Statement and payment method as recorded above is hereby acknowledged and agreed to by the undersigned:

Father _____ Mother _____
 Legal Guardian _____ Date Signed _____

Office Use: Date Received _____	Enroll. Fee _____ Check # _____ Received by _____
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PLEASE READ VERY CAREFULLY BEFORE SIGNING

Please both parents initial each item and sign below

- ___ / ___ 1. I agree to pray for the needs of my child and the school with the faith and trust that God's will be accomplished in both.
- ___ / ___ 2. I agree to grant permission for my child to take part in all authorized school activities, sports and school sponsored trips away from the actual school premises; and do further absolve the school from any liability to me or my child resulting from any injury which may occur. Parents will be informed of sports schedules and school trips and students will have adult supervision.
- ___ / ___ 3. I agree to support the discipline policy of this school and further agree to maintain that support at home.
- ___ / ___ 4. I understand that Washtenaw Christian Academy maintains the right to suspend or expel my child if my child fails to maintain established standards and discipline, or in the event financial obligations have not been met.
- ___ / ___ 5. I agree to uphold a Christian testimony and pay all financial obligations when due. I further understand that late fees will be charged when accounts are not paid by the 20th of the month. I understand that my child's records will be held if my account is not paid in full upon leaving or graduation.
- ___ / ___ 6. I understand that if it is determined that tutorial services are needed for my child to remain enrolled, there is an additional fee for these services.
- ___ / ___ 7. I understand that all enrollment contracts are for one year. There will be no tuition refunds for early departures unless for disciplinary or hardship reasons.
- ___ / ___ 8. I agree to encourage my child in his studies by spending time with him/her and seeing that all homework is done neatly and thoroughly.
- ___ / ___ 9. I agree to make every effort to get my child to school daily and on time, except in cases of illness or emergency.
- ___ / ___ 10. I agree to resolve all concerns and conflicts in a biblical manner according to Matthew 18. The Matthew 18 Principle includes: (1) keep the matter confidential, (2) keep the circle small, (3) be straight forward, and (4) be forgiving.
- ___ / ___ 11. I acknowledge that the school will be operated in accordance with its Statement of Faith and Philosophy of Education.
- ___ / ___ 12. I have thoroughly read and understand all of the above and so acknowledge my support by my signature.

Father's Signature _____ Date _____

Mother's Signature _____ Date _____

Washtenaw Christian Academy admits students of any race, color, creed, national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the School. It does not discriminate on the basis of race, color, creed, national and ethnic origin in administration of educational policies, admissions policies, scholarship and loan programs, athletic or other School-administered programs.

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