



K3 & K4 2021 REGISTRATION FORM

CHILD'S INFORMATION:

Child's Name: _____ Age: _____ Birth Date: _____

*All students must have a copy of birth certificate and immunization record on file with FPA.

Parent Email: _____

Emergency Telephone Number(s): _____

Registered for 2021-2022 at FPA? _____

Allergies (circle): Yes No If yes, details: _____

***Students MUST be currently enrolled or enrolled for 2021-2022 at FPA. Check all that apply below:**

<p style="text-align: center;">June 7 - June 11</p> <p>Monday Tuesday Wednesday Thursday Friday</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p><input type="checkbox"/> 7:30am - 12:30 pm <input type="checkbox"/> Pick-up after 12:30 pm</p>	<p style="text-align: center;">July 26 - July 30</p> <p>Monday Tuesday Wednesday Thursday Friday</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p><input type="checkbox"/> 7:30am - 12:30 pm <input type="checkbox"/> Pick-up after 12:30 pm</p>												
<p style="text-align: center;">June 14 - June 18</p> <p>Monday Tuesday Wednesday Thursday Friday</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p><input type="checkbox"/> 7:30am - 12:30 pm <input type="checkbox"/> Pick-up after 12:30 pm</p>	<p style="text-align: center;">August 2 - 6</p> <p>Monday Tuesday Wednesday Thursday Friday</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p><input type="checkbox"/> 7:30am - 12:30 pm <input type="checkbox"/> Pick-up after 12:30 pm</p>												
<p style="text-align: center;">June 21 - June 25</p> <p>Monday Tuesday Wednesday Thursday Friday</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p><input type="checkbox"/> 7:30am - 12:30 pm <input type="checkbox"/> Pick-up after 12:30 pm</p>	<p style="text-align: center;">Full Day: 7:30 a.m. - 5:30 p.m. Half Day: 7:30 a.m. - 12:30 p.m. Prices below include weekly field trip costs.</p>												
<p style="text-align: center;">June 28 - July 2</p> <p>Monday Tuesday Wednesday Thursday Friday</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p><input type="checkbox"/> 7:30am - 12:30 pm <input type="checkbox"/> Pick-up after 12:30 pm</p>	<table border="0"> <thead> <tr> <th style="text-align: left;"><u>FULL DAY Weekly Tuition</u></th> <th style="text-align: left;"><u>Each Child:</u></th> </tr> </thead> <tbody> <tr> <td>Five Full Days</td> <td>\$202</td> </tr> <tr> <td>Four Full Days</td> <td>\$176</td> </tr> <tr> <td>Three Full Days</td> <td>\$145</td> </tr> <tr> <td>Two Full Days</td> <td>\$114</td> </tr> <tr> <td>One Full Day</td> <td>\$63</td> </tr> </tbody> </table>	<u>FULL DAY Weekly Tuition</u>	<u>Each Child:</u>	Five Full Days	\$202	Four Full Days	\$176	Three Full Days	\$145	Two Full Days	\$114	One Full Day	\$63
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(See other side)

UNDERSTANDING THE FINANCIAL AGREEMENT

The first week's tuition must accompany the registration form.

You may pay the entire summer by making arrangements with the Business Office.

FPA families will be billed through FACTS.

A fee of \$10.00 per 15 minutes late fee will be charged for children who are picked up later than the regular dismissal time.

I understand that I am responsible for payment of each week that my child is registered. The cancellation or rearrangement of weeks must be received and approved by the director seven days prior. Without prior written approval, I will be responsible for my original registration.

UNDERSTANDING THE MINISTRY AND MISSION OF THE SUMMER CRU

I understand that the school has the right to dismiss any student for lack of cooperation with school policy by the student, parent or guardian.

I have disclosed sufficient information regarding my child's needs - emotional, social, mental, spiritual and/or physically so that the school will be effective in fulfilling its mission.

I agree to release and hold harmless the school, the agents and the employees from all claims, damages, or other liabilities, which are not the result of gross negligence by the school, its agents or employees.

I support and pledge my full cooperation to the school's mission, policies and goals (see Parent/Student Handbook). I will bring any questions, concerns or criticisms directly to the school's administration to be properly considered by those in authority.

Parent Signature

Date