

## Application Forms

- All applicants must submit a complete an application packet along with an Application Fee of \$75 to the school office. Please fill out all forms **COMPLETELY** and sign where indicated.
- Once the completed packet has been received you will be contacted to schedule a family interview and admissions testing for each student.
- Students entering 1<sup>st</sup>-12<sup>th</sup> grades will be required to submit a copy of their most recent report card.
- If the student currently has an IEP or 504 plan, you must submit copies of the diagnosis and plan. We will determine if we have the adequate resources to meet your child's educational needs.
- A \$40 refund will be issued if student is not offered enrollment.

## Upon being granted admission to Grace Christian Academy:

- Registration packet must be completed.
- Please bring copies of the following items to the school office:
  - 1. Name, address, and phone number of previous school
  - 2. Copy of your student's birth certificate
  - 3. Current Immunization Records
  - 4. For students entering Kindergarten, a North Carolina Kindergarten Health Assessment Report completed by the student's physician and turned in to the school office by August 31<sup>st</sup> or at enrollment.
  - 5. Students entering 7<sup>th</sup> Grade must provide evidence of receiving a 3-dose series of Hepatitis B vaccine, second dose of measles vaccine (given with MMR), and a recommended tetanus-diphtheria booster.
  - 6. Students entering  $12^{\text{th}}$  grade must provide evidence of receiving a  $2^{\text{nd}}$  dose of the

## Tuition and Fees

GCA has provided several payment options for the convenience of our parents which are located in the Financial Information section of this packet. You will also find a fee schedule in the Financial Information section. Please check for all fees that apply to your student and the due dates for each one. Your prompt payment of tuition and fees is **expected** and a late fee of \$30 will be applied to your account for ALL late payments. We need your cooperation in making timely payments to ensure that we are able to meet our own financial obligations each month.

All forms must be filled out. Applications cannot be accepted if paperwork is not fully completed. Please turn in all paperwork to the school office.



Applicant's Name_		First				Middle			Last	
Home Address							Hoi	me Phone		
City				State_					Zip	
Birth Date				Sex:	Μ	F	Gra	de Enteri	ng in 2024	/25
Name of current so	chool									
FATHER/MALE G	UARD	IAN				MOTHE	ER/FEM	ALE GU	ARDIAN	
Name						Name				
Employer						Employ	er			
Home Phone						Home Phone				
Work Phone						Work Pl	none			
Cell Phone						Cell Pho	one			
E-Mail						E-Mail_				
Address (if other the	han app	olicant)				Address	(if othe	er than ap	oplicant)	
Student lives with	: Bot	h Paren	ts	Mother Onl	У	Father			er:	
Name and Address	s of pare	ent(s) or	guardia	an(s) to who	om gr	ade repor	ts and f	inancial s	statements	s are to be sent:
Name					Rela	tionship t	o applic	eant		
Have you ever app	lied/bee	en enroll	ed at G	CA in the p	ast? _			If yes,	when	
Name of the churc	h you a	re attend	ling (if	applicable)_						
Each student will a needed for your st		a school	t-shirt	at the begin	ning	of the sch	nool yea	r. Please	indicate b	y circling the siz
YXS	YS	YM	YL	YXL	AS	AM	AL	AXL	AXXL	
				Office	e Use	Only				
Date Received	Payment Amount \$					Check/Cash/CC				



# **Financial Agreement**

### Please choose **ONE** of the following options:

- $\square$  Pay all fees and tuition by August 1, 2024 and receive a \$100 discount
- $\square$  Ten equal monthly payments August 2024 through May 2025
- $\square$  Twelve equal monthly payments June 2024 through May 2025
- $\square$  I am a recipient of the North Carolina Opportunity Scholarship. \*

All Monthly tuition payments are due by the 10<sup>th</sup> of each month. A late charge of \$30 will be applied to any account that is not paid by the 25<sup>th</sup> of the month unless prior arrangements have been made in the office.

If an account is still past due on the 15<sup>th</sup> of the following month, that student(s) may not attend school until the account is brought current, and absences will accrue for the student(s).

\*All Opportunity Scholarship participants are responsible for paying any remaining balances beyond the amount awarded by the scholarship and also, any non-covered expenses such as, extended care, sports fees, field trips, etc.

## Extended Care

Parents are allowed a 15-minute courtesy time after school is dismissed for after school pick up of students. Students not picked up by 3:15 p.m. will be signed into Extended Care, and parents will be billed starting at 3:00 p.m., as their child has been in the care of staff the entire time. All students **MUST BE SUPERVISED** while on school campus. Please, do not ask your child to wait for you after 3:00 p.m. During these time periods, any child that is not engaged in a supervised activity will be sent to Extended Care and you will be charged for this time. Extended Care closes promptly at 5:30 p.m.

There is a late charge of \$2 per minute for children picked up after 5:30 p.m.

# Please note that Extended Care is only available for the academic school year only. Extended Care is not offered on recognized holidays, school breaks or half days.

We(I) have selected the best payment option for our family and understand the importance of making timely payments to the school. I understand that failure to do so places a financial burden upon the school and will result in a late fee applied to my account for any payments that are 15 or more days late unless I have made prior arrangements with the school office. I also understand that my child must be under adult supervision at all times while on campus and when my child must stay past 3:15 p.m., unless participating in a supervised activity, they will be signed into Extended Care and I will be charged for this time.

Parent Signature\_

Date\_



## Emergency Information and Medical Treatment Authorization 2024-2025

Student's Name: \_\_\_\_

Please list ALL individuals who are allowed to pick up your child and those who can be contacted in the case of an emergency, if we are unable to reach you.

Name	Relationship	Phone Number
1		
2		
3		
4		
5		
6		
7		
8		

Please list any allergies and/or medical conditions that we need to be aware of:

#### AUTHORIZATION AND CONSENT OF PARENT(S) OR LEGAL GUARDIAN(S)

As parent/legal guardian of \_\_\_\_\_\_\_, I grant my authorization to Grace Christian Academy staff/designated adult to administer general first aid treatment for minor injuries or illnesses. If the injury or illness is severe, I authorize him or her to seek professional emergency personnel to attend, transport, and treat the minor and to issue consent for any medical care deemed advisable by a licensed medical professional or institution in my absence. I authorize the designated adult to exercise best judgement upon the advice of medical or emergency personnel. This authorization will remain effective for the duration of the 2024-25 school year, unless revoked in writing to the school office sooner. I agree to hold harmless and release Grace Christian Academy and its staff/designated adults from liability for any accident, injury or illness that results from student's participation in school programs, classes or activities.

Parent/Guardian Signature



# Authorization to Administer Tylenol 2024-2025

In the event my child complains of a headache or some other malady for which Tylenol is commonly administered, I hereby instruct Grace Christian Academy's personnel to do the following upon my verbal consent:

Child's Name\_\_\_\_\_ Grade \_\_\_\_\_

□ Administer Tylenol (dosage commensurate with age and weight of child). My child is not allergic to this type of medication and I will not hold the school responsible for any adverse effects this medication might have on my child.

□ Please do not administer Tylenol to my child.

Parent Signature

Date

# <u>Grace Christian Academy Media Release</u> <u>2024-2025</u>

Grace Christian Academy uses a variety of media to promote our school. Media used may include newspaper, brochures, newsletters, internet, website, etc....

Your signature below provides consent for Grace Christian Academy to use pictures or digital images of your child(ren) or your family for Grace Christian Academy media.

These images will not be sold or used for any purposes other than Grace Christian Academy purposes.

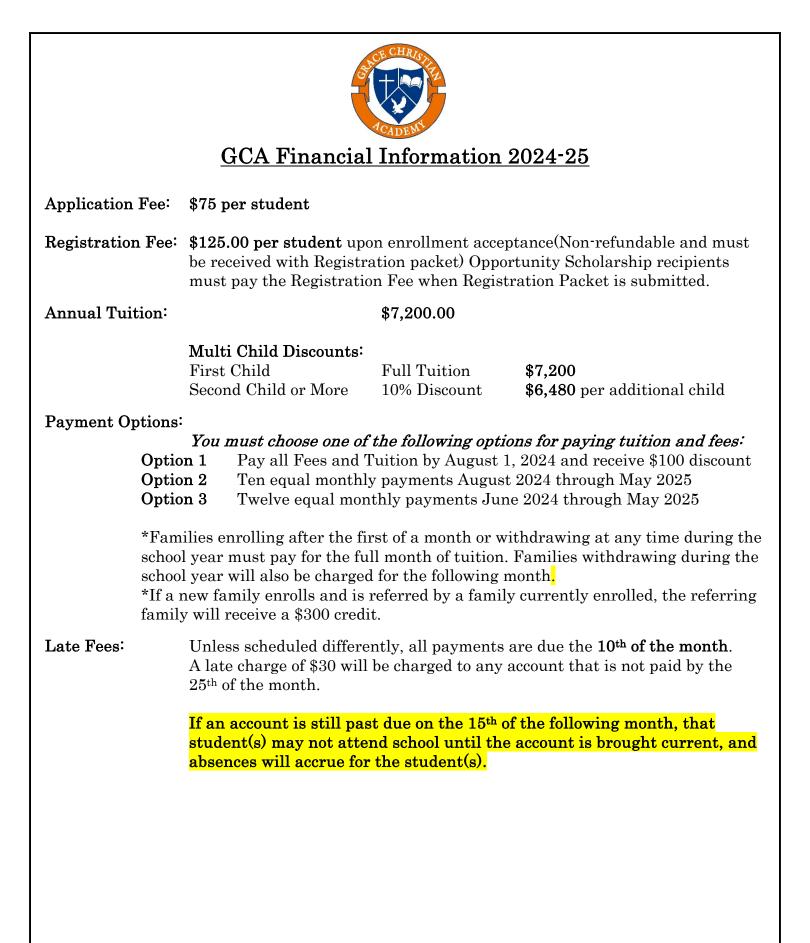
Family Name (Please Print)

□ I give my permission for Grace Christian Academy to use pictures or digital images of my child(ren) or family for any media purposes.

□ I **do not** give permission for Grace Christian Academy to use pictures or digital images of my child(ren) or family for any media purposes.

Parent Signature\_\_\_\_\_

Date \_\_\_\_\_





# GCA Financial Information 2024-25

**Returned Check:** A \$35.00 charge per returned check or failed electronic payment will be applied to your account. After a returned check or failed electronic payment is received, cash, a cashier's check or money order will be required for payment.

**Extended Care:** Rates: \$6.00 per hour for after school care.

Extended Care is only available from August through May during the academic school year. After School Care begins at 3:00 p.m. and goes until 5:30 p.m. There is a late charge of \$2 per minute for children picked up after 5:30 p.m.

All students MUST BE SUPERVISED while on school campus. Please do not ask your child to wait for you after 3:15 p.m., they must be signed in to Extended Care, regardless of their age. Also, your child is not allowed to sit and watch while other activities are going on. During these time periods, any child that is not engaged in a supervised activity will be sent to Extended Care and you will be charged for this time. Extended Care closes promptly at 5:30 p.m. You will incur a **\$2 late charge** per minute for every minute after 5:30 p.m.

Extended Care will be billed by the 5th of the subsequent month and must be paid by the end of that month. If it is not paid by this time, a \$10 late fee will be added to your account.

#### Conditional Fees:

Lost Book Fee:	Replacement cost of textbook
Kindergarten Graduation Fee: Due by Jan. 31, 2025	\$100 per student (includes cap & gown)
Senior Graduation Fee: Due by Jan. 31, 2025	\$150 per student (includes cap & gown)
Spiritual Enrichment Trip:	Grades 7-12

Crowder's Ridge Camp Dates and Cost TBA

The Spiritual Emphasis trip is REQUIRED for ALL students!



## Parental Acknowledgment and Agreement of Cooperation

In choosing to register my child as a student at Grace Christian Academy, I realize Grace Christian Academy is a religious non-profit school. By signing below, I acknowledge:

•I have read the GCA Financial Information for 2024-25 and agree to be personally responsible for all tuition and fees, and all other financial expenses incurred by GCA on behalf of my child(ren). I understand that no student records will be released nor diplomas given for any child with an unpaid balance on their account.

• It is a privilege to enroll at Grace Christian Academy. The privilege of enrollment is contingent upon cooperation between the parents/guardians and the school. This is based on the Biblical principle found in Amos 3:3, "Can two walk together, except they be agreed?" .

• I agree to support the school's endeavor to enrich my child's education academically, spiritually, and socially.

•I endorse my child's participation in the weekly chapels, daily Bible classes, and Christian, biblical training that are an integral part of the overall academic program at GCA. I agree to support the ministry philosophy and standards of the school. If at any time my actions or conduct show that I no longer support the philosophy, policies and Biblical values of the school, I understand that my child may be removed from enrollment at Grace Christian Academy.

•I acknowledge that if my child fails to comply with all rules and standards of Grace Christian Academy, they may be suspended or expelled. I recognize that any disciplinary action taken by the school may become a part of my child's permanent school record.

Parent Signature	Date
Parent Signature	Date