

# Community Christian Academy

1016 6<sup>th</sup> Street  
P.O. Box 680  
Hempstead, Texas 77445  
Phone: 979 826-4600  
Fax: 979 826-3300

## Registration, Tuition and Book Fees

### Annual Registration Fees

Re-Enrollment	\$150.00
New Enrollment	\$200.00
Computer Fee	\$100.00
Misc. Fee	\$ 50.00
PTO Fees	\$100.00

Class	Monthly Tuition (10 payments)	Annual Book Fee** If pd by 05/11 / After 5/11
3Yr Old (K-3)	\$425.00	\$150.00/\$200.00
4Yr Old (K-4)	\$425.00	\$200.00/\$250.00
Kindergarten (K-5)*	\$425.00	\$300.00/\$350.00
First Grade	\$400.00	\$400.00/\$450.00
Second Grade	\$400.00	\$400.00/\$450.00
Third Grade	\$400.00	\$400.00/\$450.00
Fourth Grade	\$400.00	\$400.00/\$450.00
Fifth Grade	\$400.00	\$400.00/\$450.00

\*K-5 will have an additional Cap & Gown Fee of \$60.00

\*\*Book fees are subject to change

Tuition paid in full for the 2021-2022 School Year will receive a 5% discount if paid before September 10, 2021/January 10, 2022.

#### Discounted 5% (1<sup>st</sup> Child)

3yr – K-5	\$4,037.50
1 <sup>st</sup> – 5 <sup>th</sup>	\$3,800.00

A 15% discount monthly on a 2<sup>nd</sup> child, and a 30% discount monthly for the 3<sup>rd</sup> child.

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## Registration Form

We are now accepting registration for 2021-2022 school year. If you are interested in reserving a spot for your child for next year, please complete the registration form below and attach a check for \$150.00 (returning students) or \$200.00 (new student) payable to CCA. All book fees must be paid in full by May 11<sup>th</sup> or the book fee will be higher.

Student Name: \_\_\_\_\_  
First Last

Student Birthday: Month/Day/Year \_\_\_\_\_

Guardian(s) Name: \_\_\_\_\_ (M)  
First Last  
\_\_\_\_\_ (D)  
First Last

Address: \_\_\_\_\_  
Street/PO Box City, State, Zip

Email Address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ (M)

Email Address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ (D)

Place of Employment: \_\_\_\_\_ Work Phone: \_\_\_\_\_ (M)

Place of Employment: \_\_\_\_\_ Work Phone: \_\_\_\_\_ (D)

Other Contact Name: \_\_\_\_\_

Other Contact Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Grade for 2021/2022 \_\_\_\_\_ Student T-Shirt Size: \_\_\_\_\_

Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

CCA teaches the A Beka College Preparatory Curriculum. CCA does not discriminate on the basis of race, color, national, or ethnic origin in administration or its educational policies, admissions policies and other School Administered programs. We are Christian based and expect all students who attend to respectfully participate in all activities. Our curriculum is college preparatory; we are not staffed to meet the needs of those requiring special education. Further, acceptance of this application is contingent upon a ninety (90) day probation period whereby the school would review students overall performance to verify that the school is a fit for the student.

## **Release and Hold Harmless Agreement**

CCA is opening for the 2021-2022 school year with traditional attendance. This Release indicates that CCA understands the risks associated with traditional attendance and shall be held harmless as a direct result of my child attending school. I understand the risks associated with attending school and participating in activities at school include but are not limited to: exposure to or contracting coronavirus (COVID-19), other viruses or illnesses; increased risk of quarantine; the need for medical care; hospitalization; and possible death.

I hereby state that I am an adult over the age of 18, and I am legally competent to sign this form on behalf of my child and myself. By signing this form, I understand the risks involved with attendance at CCA and I acknowledge the existence of risks which are not obvious or predictable. I intend this Release to extend to injury or loss associated with the aforementioned risks to extend to myself, my child, and those with whom we are in contact, as applicable.

In consideration of myself and my child participating at CCA's educational program, I waive and discharge CCA, its officers, directors, employees, agents, and representatives from any and all liability for any and all loss or damage, and any claim or illness resulting from attending school up to and including death.

I fully understand the risks associated with the aforementioned participation. I assume any risk associated with my child attending school and agree to indemnify CCA, its officers, directors, employees, agents, and representatives from any loss liability, damage, or cost that may be incurred due to my child's attendance at school or at school activities.

By signing this Agreement, I acknowledge that the terms are contractual and not a mere recital. The parties to this Agreement acknowledge the interpretation and enforceability of this Release shall be governed by the laws of the State of Texas.

I expressly agree that this Release, Waiver, and Indemnity Agreement is intended to be as broad and inclusive as permitted by applicable laws, and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

I understand that by signing this Agreement I am giving up certain legal rights and remedies on behalf of my child and myself to recover damages in the event of death, personal and/or bodily injury, medical expenses, attorney's fees, and/or any other losses that my student or I may incur as a direct result of my child's attendance and participation at CCA.



I HAVE CAREFULLY READ THE RELEASE AND KNOW AND  
UNDERSTAND THE CONTENTS CONTAINED HEREIN. I SIGN THIS  
RELEASE VOLUNTARILY AS MY OWN FREE ACT WITH FULL  
KNOWLEDGE OF ITS SIGNIFICANCE INTENDING TO BE LEGALLY  
BINDING.

My Child's Name: \_\_\_\_\_ Grade \_\_\_\_\_

Parent / Guardian:

\_\_\_\_\_  
Date \_\_\_\_\_ (both parents/guardians must sign)

Parent / Guardian:

\_\_\_\_\_  
Date \_\_\_\_\_ (both parents/guardians must sign)

Additional Children attending CCA

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

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

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

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