

Excellence Academy

2022-2023 School Year

REGISTRATION FORM

STUDENT INFORMATION - Please type or print legibly.

Last Name: _____ First Name: _____

Sex: Female Male Age: _____

Previous School: _____

Grade attending for year 2020-2021: _____

Home address: _____

City: _____ State/Province: _____ Postal/Zip Code: _____

Home Telephone: () _____ Cell: () _____

Parent's email: _____

 Please list ADA Accommodations needed: _____

Mother's name: _____ Father's name: _____

Mother's day phone: _____ Father's day phone: _____

Mother's cell: _____ Father's cell: _____

Person's authorized to pick up child: _____
(Please provide a copy of their ID.)

Other Dismissal Arrangements _____

Emergency contact: _____

Relationship to child: _____ Phone: () _____

Specify any health problems your child has: _____

Is your child on any medication? No Yes If so, please specify: _____

Has your child been immunized? Yes No Are immunizations current? Yes No

Lunch: When sending your child's lunch and/or snack, please be sure your child's lunch is clearly marked with his/her first and last names. Glass bottles/containers are not allowed.

Payments: Tuition may be paid by cash (exact amount) or by check or via the school website (by card). Make checks payable to *Excellence Academy*.

**Monthly Tuition (due on the last day of the month prior to the month being paid)
(Initial tuition for school year is due August 1. Tuition for two months must be paid along with the annual book package fee of \$300 per child/ kindergarten books are \$200).**

- **First Child \$800**
- **Additional Child/Children \$700 each**

Registration fee: \$50 per child (Due when application is submitted.)

SCHOOL HOURS: 9:00AM TO 3:00PM (M-TH); 9:00AM TO 1:00PM (F)

• DROP OFF AND PICK UP TIMES

Drop off time: 8:45-8:55am

Pick up time: 3:00-3:15pm

Before school care will be provided from 7:30am to 9:00 daily. Fee is \$25 per day.

After school care will be provided from 3:00-5:00pm. Fee is \$35 per day.

EMERGENCY MEDICAL TREATMENT

You have our permission, in the event of an emergency and in case we are unavailable, to authorize any physician, nurse practitioner or medical personnel to examine, interview, test and if necessary, treat my child _____ as they may deem advisable.

Parent/Legal guardian's name _____ Date _____

Parent/Legal guardian's Signature _____ Date _____

Doctor _____ Phone number _____

Insurance carrier _____ Policy number _____

Who is financially responsible for the student? _____

I hereby give permission to **Excellence Academy** to photograph and/or videotape the student for educational or promotional purposes. _____ (Initial)

SIGNATURE OF PARENT OR GUARDIAN _____

PRINT NAME _____

DATE _____

Items required to complete enrollment packet:

1. Application
2. Original Birth Certificate
3. Previous School Records
4. Immunization Record (all shots must be up to date)
5. ID for all who will pick up child from school
6. Enrollment Fee (\$50)
7. First two months of tuition (Due by August 1)
8. \$300 Book Fees (Paid once a year; due by August 1)