



CALVARY CHRISTIAN ACADEMY

1401 Oakhurst Scenic Drive
Fort Worth, TX 76111
817.332.3351
cca-tx.org

Re-Enrollment Application ELEMENTARY (k-6th Grade)

Please complete a separate form for each student in your family.

This application is for students presently enrolled who desire to return for the **2021-2022** school year. No student is automatically re-enrolled. *Your registration fee of **\$225 for first student, \$175 for the second student and \$150 for each additional student** must accompany this application. The application must be turned in to the school office by **March 8, 2021**.* Re-Enrollment fee will increase \$25 per student after March 8th.

The book fee of **\$500 per Elementary student (kindergarten through 6th grade)** is due by **July 1, 2020**. Please, remember that the registration, book & computer, and athletic fees are non-refundable. The first month's tuition is due in **August 2021** for the 10-month payment plan or **June 2021** for the 12-month plan. **Any tuition paid in full for the 2021 - 2022 school year by July 1st is eligible for a 12.5% discount; paid in full by August 15th is eligible for a 10% discount.**

This completed re-enrollment along with the registration fee indicates your desire for your child to remain at Calvary Christian Academy. **All bills must be current before a student(s) can re-enroll.**

STUDENT INFORMATION

Grade to Enter _____

Name (last) _____ (first) _____ (mid. initial) _____

Address _____

City _____ State _____ ZIP _____

Home Phone _____ Mobile Number _____

Parent/Guardian Email: _____

IMPORTANT - Email is the primary medium for distribution of school information for enrolled students and families. This includes announcements, student progress reports, and teacher communications. Your email address also allows you access to Facts Parent Portal. Please make sure we have your *current, valid* email address in our Facts system.

FAMILY INFORMATION

Has any of the family contact information on file changed? Yes No

If any family information has changed, it is of the utmost importance that the Academy's records are updated. Any change in **address, name, marital status, employment, email address, phone number, emergency contacts, doctor, health insurance**, etc. must be submitted. This is for the safety of your student. If there has been any change, please change the information on the front and back of this form. Please contact the front office with any other changes. By signing below you attest all the information on file is up to date.

Parent/Guardian Signature

CCA STATEMENT OF FAITH

Calvary Christian Academy bases its existence and operating policies upon principles found in God's Word. Calvary Christian Academy believes:

- The Bible is the inspired, infallible, and authoritative Word of God (II Timothy 3: 16-17)
- There is one God manifested in three persons: The Father, Son, and Holy Spirit (I John 5:4-7)
- All men have sinned, which makes necessary a rebirth through confession and belief in the Lord Jesus Christ (Romans 3:23-25)
- The Holy Spirit is the Spirit of God that leads and guides us into all truths, and that His gifts are in operation today (John 16:23), (I Corinthians 2:12)
- The local church is necessary for the maturity of the believer (Hebrews 10:25)
- There is a resurrection of believers into everlasting life and an everlasting punishment for those who do not believe (John 3:16)
- Marriage as sanctioned by God in scripture joins one man and one woman in an exclusive union. We affirm the Biblical principles relating marriage and sexuality. (Matthew 19:4-6)

As a CCA Parent you must pledge support to our statement of faith and must pledge to spiritually invest in your family specifically your student/s. CCA requires our families to be consistently involved in a Bible-believing church.

I/We as parent(s)/guardian(s) have accepted Jesus Christ as our personal Lord and Savior.
I/We as parent(s)/guardian(s) understand, agree, and support the CCA Statement of Faith.

Parent/Guardian Signature

Date

As a CCA student you must pledge to live your calling to a higher standard of conduct as evidenced in your thoughts, your words, and your behavior both in school and out of school. By signing this agreement, you pledge to restraint from engaging in a lifestyle that is biblically immoral. Moreover, as a student you pledge to be invested in your spiritual growth.

Student Signature

Date

STATEMENT OF AGREEMENT

I agree to insist that my child submit to the spiritual, academic and disciplinary regulations, and all other requirements instituted by the administration and carried out by the administration and faculty of Calvary Christian Academy. In addition, I give permission for my child's picture to be used in any school publications, advertisements, social media posts, and the CCA website.

Parent/Guardian Signature

Date

CODE OF HONOR PLEDGE

In signing the Code of Honor Pledge, I fully recognize that Calvary Christian Academy was founded to be and is committed to being a Christian institution. Calvary Christian Academy advocates living a Christian life in and out of school; therefore, we ask that all students pledge to agree to the following:

- **I pledge** to give myself to intellectual pursuits and to use the full powers of my mind for the glory of God.
- **I pledge** to do individual work without assistance on all tests and assignments requiring individual preparation. I will not cheat or plagiarize.
- **I pledge** to be truthful in all dealings with faculty and administration.
- **I pledge** use kind words and look for the best in others.
- **I pledge** not to steal, lie, or be a talebearer.
- **I pledge** to obey the administration, faculty and support staff of CCA.
- **I pledge** to abide by the rules and regulations that are set before me in the student handbook.

Student Signature

Date

CCA FINANCIAL POLICY

As a part of my obligation to Calvary Christian Academy, I agree to the following items:

- It is my understanding that the policy of the school is to make no refunds on registration fees.
- I agree and understand that tuition payments are due on the 5th or 20th of each month.
- I agree and understand that if my tuition payment is 15 days late, my child(ren) will be welcome back on campus until the account is made current; absences are not excused.
- I agree and understand that if my account becomes 30 days past due, my child(ren) will be unenrolled from CCA until the account is made current; reenrollment is not guaranteed.
- I agree and understand that upon withdrawing my child(ren), all transcripts and records will not be released until my account is paid in full and current.
- I agree and understand that if my account is 15 days late, I will be charged a \$25.00 late fee and if my account is 30 days late another \$25 late fee will be charged (non-refundable).
- I agree and understand that there will be a \$30.00 charge for all checks returned "insufficient funds."

Parent/Guardian Signature

Date

UPDATED MEDICAL INFORMATION

Primary Care

Physician: _____ Phone _____

Medical Conditions:

List all allergies and/or allergic reactions to medications:

List all medications student currently takes:

Any other medical information for this student:

Health Insurance

Company _____ Phone _____

Group/Plan Number /ID _____ Policy number _____

Emergency Contact

1. Full Name: _____ Relationship: _____

Primary Phone: _____

Email: _____

2. Full Name: _____ Relationship: _____

Primary Phone: _____

Email: _____