

ABUNDANT LIFE CHRISTIAN ACADEMY

Building a Legacy of Christian Excellence One Student at a Time



Isaiah 40:31

Admissions Application 2010-2011

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Margate, Florida 33063

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www.alcapro.co

ACCREDITED BY: Association of Christian Teachers and Schools (ACTS) and Florida League of Christian Schools (FLOCS)
Additionally, the ALCA Preschool is ACTS/FLOCS Accredited, FLOCS Certified, and a Gold Seal Preschool

NOTICE OF NON-DISCRIMINATORY POLICY

Abundant Life Christian Academy admits students of any race, national and ethnic origin to all rights, privileges, programs and activities. It does not discriminate on the basis of race, color, or ethnic origin in the administration of its educational policies, admission policies, scholarships, athletics, or any other school sponsored program

STUDENT INFORMATION

It is not necessary to duplicate information that is identical for all students

Student #1 - Full Legal Name		
Social Security Number	Date of Birth	
Sex	Age	Grade Applying For
Ethnicity		
Circle One - 11:30 a.m.	2:45 p.m.	6:00 p.m.
Preschool Dismissal Only		
Yes - No		Yes - No
Circle - Extended Care	Circle - Summer Camp	
School Currently Attending		
Phone Number	Fax Number	

Student #2 - Full Legal Name		
Social Security Number	Date of Birth	
Sex	Age	Grade Applying For
Ethnicity		
Circle One - 11:30 a.m.	2:45 p.m.	6:00 p.m.
Preschool Dismissal Only		
Yes - No		Yes - No
Circle - Extended Care	Circle - Summer Camp	
School Currently Attending		
Phone Number	Fax Number	

Student #3 - Full Legal Name		
Social Security Number	Date of Birth	
Sex	Age	Grade Applying For
Ethnicity		
Circle One - 11:30 a.m.	2:45 p.m.	6:00 p.m.
Preschool Dismissal Only		
Yes - No		Yes - No
Circle - Extended Care	Circle - Summer Camp	
School Currently Attending		
Phone Number	Fax Number	

Student #4 - Full Legal Name		
Social Security Number	Date of Birth	
Sex	Age	Grade Applying For
Ethnicity		
Circle One - 11:30 a.m.	2:45 p.m.	6:00 p.m.
Preschool Dismissal Only		
Yes - No		Yes - No
Circle - Extended Care	Circle - Summer Camp	
School Currently Attending		
Phone Number	Fax Number	

HEALTH INFORMATION

	Doctor's Name	Office Phone Number	Name of Insurance Company	Group and/or Policy #
Physician				
Dentist				

Please list any allergies or other necessary medical information for student(s). (Attach additional sheet if necessary.)

Student Name	Details
1.	
2.	
3.	
4.	

Is there any medical reason that any student listed above cannot participate in physical education or sports programs? Please explain.

Student Name	Details
1.	
2.	
3.	
4.	

An updated HRS 680 Form (Immunization Record) and HRS 3040 Form (Well Check Up) dated within the last two years must be attached for each student. All forms must be originals. Out of state applicants must have medical records transferred to State of Florida forms by the physician.

CHURCH INFORMATION

Abundant Life Christian Academy is in partnership with parents and church to support and nurture the spiritual growth and maturity of each student; therefore, regular church attendance is essential and expected.

Name Home Church _____ Phone Number _____ Pastor's Name _____

Address _____ City _____ State _____ Zip _____

How often are services attended by each member of the family? (Please check frequency)

Father: _____	3-4 times monthly	_____	Occasionally	_____	Seldom/Never
Mother: _____	3-4 times monthly	_____	Occasionally	_____	Seldom/Never
Student(s): _____	3-4 times monthly	_____	Occasionally	_____	Seldom/Never

In addition to attendance, with which activities or responsibilities are you and your student(s) involved at church?

Please give a brief statement summarizing your salvation experience, your personal relationship with Jesus Christ, and your belief about the Bible. Attach separate sheet if more space is needed.

Father: _____

Mother: _____

PARENTAL (OR LEGAL GUARDIAN) CONTRACT (Financial Information & Obligation)

My signature below indicates that I have read, understand, and agree with the Parental (or Legal Guardian) Contract in making application for my child(ren) to attend Abundant Life Christian Academy.

- I agree to uphold the standards of the school in every area of its philosophy and policies including spiritual, academic, attendance, behavioral, dress code, electronic use, Internet, moral, disciplinary, Code of Honor, and to maintain the basic principles of biblical morality in my home.
- I agree to assume the responsibility for my child(ren)'s education by actively co-laboring with the school, supervising homework, being an encourager, and keeping in regular contact with my child(ren)'s teachers.
- I agree to support the school to the best of my ability through attendance and participation in the various school activities, and through prayer, time, and financial gifts. Additionally, I pledge to pay my tuition on time.
- Further, in the event that my child(ren) become(s) ill or is (are) injured while under school supervision, I give my consent for the school authorities to take the following steps:
 1. Contact me and follow my instructions.
 2. Contact the child(ren)'s physician and follow his instruction, in the event neither parent can be reached.
 3. Use their own discretion in contacting a properly licensed physician and follow his instructions if the child(ren)'s physician cannot be reached or call 911.
- If, in the opinion of a properly licensed and practicing physician, my child(ren) need(s) medical or surgical services which require my consent before being supplied, and I cannot be reached, I hereby authorize, appoint and empower the school principal, or her designee, to furnish on my behalf such written or oral authorization as may be so required. Further, I release the principal, or her designee, Abundant Life Christian Academy and Abundant Life Christian Centre from any liability which might arise from the giving of such authorization, it being my desire that my child(ren) be furnished with such medical or surgical services as soon as reasonably possible after the need arises.
- I understand some students appear in school promotional pictures and videos. I give my permission for my child(ren) to participate, if selected.
- I understand that my child(ren), if accepted, cannot be enrolled until the matriculation fee has been paid and the enrollment contract has been signed. I further understand that all payments and fees are non-refundable.
- I understand that once the parent contract has been signed and the matriculation fee paid, I am responsible to pay the full tuition and fees for the academic semester, whether I voluntarily withdraw my child(ren) or my child(ren) is (are) dismissed from the school. Preschool students are only responsible for current month enrolled. Records will not be forwarded to another school until all financial obligations have been satisfied.
- I understand that all past due balances (five days late) will be subject to a \$30 late fee. Any balances over 40 days delinquent may result in student(s) being removed from school. Failure to pay delinquent accounts may require collections.
- I agree to be personally responsible for all financial obligations incurred at Abundant Life Christian Academy.
- Abundant Life Christian Academy reserves the right to refuse any application or to dismiss any child(ren) at any time for unacceptable work or conduct, or for any other reason deemed necessary. Acceptance into the Academy is not guaranteed until admission process is completed.

Father's Signature _____ Date _____

Mother's Signature _____ Date _____

Legal Guardian's Signature _____ Date _____

Administrator's Signature _____ Date _____

FOR OFFICE USE ONLY

Student Name	Registration	Matriculation	EXS/ Camp Registration	Entrance Testing	Tech. Fees	Total Fees	Form of Payment	Amount Paid/Date	Payment Rec. By
							Cash Check #	/	
							Cash Check #	/	
							Cash Check #	/	
							Cash Check #	/	

