

## STUDENT ENROLLMENT FORM

ALL PAGES OF THIS FORM (FRONT AND BACK) MUST BE COMPLETELY FILLED OUT & RETURNED WITH PAYMENT TO CONSIDER EACH STUDENT "ENROLLED".

Student's Name:	DOB	_/	_/	_ Grade:	Gender:	SS#:	
Student's Name:	_DOB	_/	_/	_ Grade:	Gender:	SS#:	
Student's Name:	_DOB	_/	_/	_ Grade:	Gender:	SS#:	
Student's Name:	DOB	_/	_/	_ Grade:	Gender:	SS#:	
Student's Name:	_DOB	_/	_/	_ Grade:	Gender:	SS#:	
A 13			C:	L		CT.	7:
Address:  Student(s) live with: Mother Father Both Pare	ents	Guardia		ıy		ST:	_ Z.ip:
Father's Name:						Work#:	
Father's E-mail:				_Cell#:		_Text Yes	No
Mother's Name: :	Employe	er:					<u>.</u>
Mother's E-mail:				Cell#:		_Text  Yes	No
Marital Status: Married Divorced Oth	er, Please e	xplain:					
If the parents are separated or divorced, with whom does the st	tudent live?		,				C 7
	_		_		-		father or mother" lines.
Would you be willing to be a classroom/office substitute (for him	re when nee	eded)?	Yes.	No If yes,	classroom or	office?	_
School attended last year:				City:			_ST:
Have any of your students ever failed a grade? Yes No	If yes, wh	hich chi	ld & gra	ade?			
Have any of your students ever been tested for or diagnosed with	n a learning	disabili	ty?	Yes No			
If yes, explain:							
Have any of your students been suspended or expelled from school	ol? Yes	N	lo				
If yes, please explain:							
Has the student ever been under the supervision of a parole office:	r or under th	ne custo	dy of a j	uvenile court or	any other cou	ırt? Yes	No
If yes, please explain:							
Have any of your students been previously enrolled at NCA?	Yes	No	If y	es, which stude	nt and year:		
Does your family attend church? Yes No If yes,	which chui	rch?					
Have you or any of your students accepted Christ as Saviour?	_	No			tized?:		Unsure
If yes, who:							
Were you referred by a current student? Yes No	If yes, c	urrent si	tudent n	ame:	-		
Parent/Guardian Signature:				Date	e:		
-							



## EMERGENCY, FINANCIAL, & CONSENT FORM



A	Yes No If yes, which student and w	1-49	
Is it to be taken at school?: Yes No		what?	
	ne such as Children's Tylenol, Children's Ibupro	rofon, Donto Digmol Tumo, Donodrul, etc. 9	
	like to be notified before administering?		
Do any of your students have any physical do		Yes No	
If yes, please explain:			
Do any of your students have any allergies?			-
Eamily Physician		Phone#:	_
	our preferred medical procedures (i.e. call pare		_
in your student has an emergency, what are	our preferred medical procedures (i.e. can pare	ents first, can 911 first, etc. ).	
Emergency Contact: a responsible adult if the	ne parent cannot be contacted:		
Name:	Relation:	<u>#:</u>	_
Name:	Relation:	<u>#:</u>	
Name:	Relation:	#:	_
ppropriate in order to provide emergency me	iorize Normstae Christian Academy personne. dical care for my child. I further agree to permi ussume full responsibility for any action taken.	nel or their designee to take whatever medical action is a nit my child to be transported to a medical facility by ambula	nce or
Parent/Guardian Signature:		Date:	
<ol> <li>understand the following:</li> <li>Tuition is due at the 1st of each month.</li> <li>All accounts must be kept current, and its accounts.</li> <li>A\$25 per student late fee will be added.</li> <li>The book fee is due before my child's best accounts.</li> <li>If a student is enrolled in NCA for every.</li> <li>All accounts must be current for the students.</li> <li>Before a child is considered "withdrawn turned in at the business office, the child.</li> <li>Student records such as report cards, transport cards, transport cards.</li> </ol>	no student may attend classes if account is more to my account if it is delinquent after the 6th of ecoks will be ordered.  Idemy is to make no refunds on fees or tuition after none day, a full month of tuition is owed. The parent MUST notify the school business of will remain enrolled and will be billed according inscripts, etc. are not released until the account is tudent not in harmony with our goals and policies.	fter the due date.  ticipate in graduation exercises.  office and sign a withdrawal form. Until the withdrawal form lingly.	
Parent/Guardian Signature:		Date:	
all activities of Northside Christian Academ result from my child attending or participat student. I give Northside Christian Academ	y. I further agree to indemnify and hold Northsiong in all activities of Northside Christian Acade y permission for my child's teacher and/or school	NCA. I hereby give my permission for my child to take paside Christian Academy harmless for any and all liability that demy. I believe that discipline is necessary for the welfare of cool representative to make and enforce classroom regulation adbook. We agree that if a conflict arises between our child/family	may each ns in

others in the NCA family (students, parents, faculty, staff, or administrator), we will address the concern directly with that person alone. I agree to cooperate with the school to ensure our child's daily attire meets the Dress Code. I hereby grant permission for Northside Christian Academy to use my child's photograph and/or video recorded image for purpose of marketing promotions. I have read all of the policy provisions listed on this form. The signature below indicates my understanding of these policies.

If you wish for your child's photo to not appear on our social media/ads, please send in a handwritten statement with your detail, signature, and date.



Northside Christian Academy reserves the right to dismiss any student not in harmony with our goals and policies. Northside Christian Academy does not discriminate on the basis of race, color, national or ethnic origin.

Parent/Guardian Signature:	Date:
i archi/Quarulan Signature.	Date: