

United Faith Christian Academy and Preschool 8617 Providence Road Charlotte, NC 28277 ● 704-541-1742 Ext. 213 ● 704-540-7926 (fax)

2020-2021 PRESCHOOL STUDENT APPLICATION

Returning Students: Chec	k box and submit co	mpleted form	s to the <u>Academy Of</u>	ffice with registrati	ion fees of \$200.00.
(Fees include \$150 Applica	tion Fee and \$50 Sup	oply Fee.)			
New Students: Check box	and submit complete	ed forms to the	Academy Office wi	ith your registratio	on fees of \$225.00. (Fee
include \$175 Application F	ee and \$50 supply fee	e.)			
Applicat	tions will not be proce	ssed until ALI	forms are submitted	d and fees are paid.	
Student's Legal Name	Lost	/	Firest.	/	Middle
			FIISt		Middle
Name child prefers to be called:					
Address		City _		State	Zip
Date of Birth	Gender	Age			
FAMILY INFORMATION (please	print clearly in black or h	olue ink)			
picuse	print cicarry in stack of s	nuc min)			
Father or Male Guardian			Mother or Female (Guardian	
Name (Dr./Mr./Rev.)			Name (Dr./Mrs./Rev	.)	
Home Address			Home Address		
City/State/Zip			City/State/Zip		
Cell W	ork		Cell	Work _	
Employer			_ Employer		
Email			Email		
Church Attending			Church Attending		
Applicant resides with (check one):	Father and Mothe	er Father a			
Father only Mother only			-	_	
If parents are separated or divorced,					
 First person to contact in s 	-				
 First person to contact in se School fees/tuition					
Receiving school commun					

Siblings:	Age	School	chool			
Siblings:	Age	School				
How did you hear of United Faith Christian	Preschool?					
We are requesting enrollment for the fol	lowing class and time: (Ch	ildren must be appropria	te age by Aug. 31. C	heck one.)		
Preschool 3's (36 - 47 months) PL	EASE SELECTFull	Day (9:00am – 3:00pm)	OR <u>Hal</u>	f Day (9:00 am	-1:00 pm)	
Preschool 4's (48+ months) PL	EASE SELECTFull	Day (9:00am – 3:00pm)	OR <u>Hal</u>	f Day (9:00 am	-1:00 pm)	
Transitional Kindergarten PL	EASE SELECTFull	Day (9:00am – 3:00 pm)	OR <u>Ha</u>	If Day (9:00am -	- 1:00 pm)	
We are requesting enrollment for the fol	lowing number of days per	week: (please check one)			
3 days/week (Tuesday, Wednesday of	& Thursday) available for Pr	ilable for Preschool 3's only		OR		
4 days/week (Monday-Thursday) av	ailable for Preschool 3's &	4's only	OR			
5 days/week (Monday-Friday) availa	able for Preschool3's, 4's &	T.K.				
 I agree to fully comply with the result the policies of UFCP (including a Faith Christian Preschool will ad Academy Parent/Student Handboth I understand that it is my responsible the school in advance, written compared to a families must be current with the school in advance, written compared to pay tuition in full or visible. If I withdraw my child prior to Juchild after August 1, 2020 will be child after August 1, 2020 will be school or its agent not be found a should incur to defend itself agains. A fee of \$35.00 will be charged the selected due date. Records will not contact information is published your child's picture may be used to school. Students are admitted, he Standards of the school be upheled. 	any revisions) without reserve there to the appearance policition. It is in the parent or legal and a sent should I have someone are 2019-2020 tuition to qualify an automatic draft ending by the responsible for one month's at the the theorem of the parent of the pare	ation. I understand and wi es, student code of conductives, student code of conductives, student to ensure daily transport of the code of	Il see that the children t, and general policies ansportation to and from transportation for my the 2020-21 school year reschool Families). Families and fee. The pply fee of \$50 at the receive or agent thereof on the thing and other costs that will be assessed to the see or agent thereof on the poly. The provided families only. The provided families only.	who are enrolled in the United Fa m school. I will p child. milies that withdrawine of application my child's behalt that UFCA/UFCF all accounts not Photos or videos or race, color, ethetudents at the	at United ith Christian provide to raw their on. f, and the P or its agent paid by the containing onic or	
I/we certify that I/we have read and underst information on this application, including the Information I/we have provided is correse. Father/Guardian Signature Mother/Guardian Signature	e withdrawal policy.	NEW STU Applicatio RETURN Applicatio	JOENT FEES \$225 n \$175 + Supply \$50 ING STUDENT FEE n \$150 + Supply \$50	<u>Amt.</u>	<u>TADS</u>	
		All fees ar	e non-refundable.			

Date Application Received:

Initials: _