



The mission of Foundation Christian Academy is to provide a strong Christian foundation for students and to prepare them for spiritual, intellectual and social growth while in a Christian setting.

APPLICANT'S NAME (FIRST) (MIDDLE) (LAST) (NAME USED)					MALE/FEMALE
ADDRESS (STREET) (CITY) (STATE) (ZIP) HOME PHONE					
DATE OF BIRTH	AGE	COUNTY AND STATE OF BIRTH	EMAIL ADDRESS		GRADE ENTERING

NAME OF FATHER (OR GUARDIAN)		HOME ADDRESS (IF DIFFERENT FROM ABOVE)			
OCCUPATION	EMPLOYER			BUSINESS PHONE	
BUSINESS ADDRESS			RELIGIOUS PREFERENCE/ CONGREGATION		
NAME OF MOTHER (OR GUARDIAN)		HOME ADDRESS (IF DIFFERENT FROM ABOVE)			
OCCUPATION	EMPLOYER			BUSINESS PHONE	
BUSINESS ADDRESS			RELIGIOUS PREFERENCE/ CONGREGATION		
WITH WHOM DOES APPLICANT LIVE?		MARITAL STATUS OF PARENT OR GUARDIAN APPLICANT LIVES WITH <input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> SINGLE <input type="checkbox"/> DIVORCED <input type="checkbox"/> WIDOW OR WIDOWER			
TO WHOM SHOULD NOTICES OF SCHOOL ACTIVITIES BE SENT? NAME: _____					
ADDRESS: _____			PHONE NO. _____		

NAME OF BROTHERS AND SISTERS	AGE	APPLYING TO FCA	SCHOOL ATTENDING
		<input type="checkbox"/> Yes <input type="checkbox"/> No	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	

LIST IN ORDER ALL SCHOOLS ATTENDED	GRADE	DATE ATTENDED	ADDRESS

Specify any physical, mental, learning or emotional conditions of which the school should be aware: _____

Completing this application does not guarantee acceptance into Foundation Christian Academy. Due to space limitations, physical and learning disabilities which the school is not equipped to handle, or other unforeseen circumstances, the school cannot guarantee the acceptance of any child. In the event that your child is not accepted, the registration fee will be refunded to you in full. You will be notified of acceptance before the first day of school.

FOUNDATION CHRISTIAN ACADEMY does not discriminate on the basis of race, gender or national origins in admissions, hiring of employees or administration of policies.

\$175 Registration Fee must accompany this Application for new students and returning students if paid after February 28.

Returning students may receive a discounted registration fee of \$125 IF paid on or before February 28, 2018.

Parents/Guardian Signature Date

Parents/Guardian Signature Date

Referral program: There is a \$500 discount for any referrals that enroll . The discount will be applied after the new enrollee has attended FCA for 1 semester. This applies only to students enrolled in K through 9th grades. If you are referring anyone, make sure they put your name on their application.

I/we were referred to FCA by: _____

FOR OFFICE USE ONLY			
Date Application Received:	Application Fee Paid:	Book Fee Received:	School Year Admission Desired: