



2021 - 2022 Elementary Enrollment Form

STUDENT INFORMATION

Student's Name _____				
Last	First	Middle	(Prefers to be called)	
Age _____	Birthdate _____	Boy ()	Girl ()	Home Phone _____

FAMILY INFORMATION

Mother's/Guardian's Name _____			Father's/Guardian's Name _____		
Address _____			Address _____		
Street	City/State	Zip	Street	City/State	Zip
Employer _____			Employer _____		
Cell Phone _____			Cell Phone _____		
Work Phone _____			Work Phone _____		
E-mail _____			E-mail _____		
Student primarily lives with _____			Custody: Mother ____ Father ____ Other ____		
*In the case of divorce/separation, include any legal documents and indicate custodial arrangements here: _____					

DEMOGRAPHICS

Student Ethnicity Caucasian ____ Hispanic/Latino ____ American Indian/Alaska Native ____ African American ____ Asian ____					
Native Hawaiian/Another Pacific Islander ____ Other (specify) _____					
Mother's Highest Level of Education _____			Father's Highest Level of Education _____		
Mother's Religious Affiliations _____			Father's Religious Affiliations _____		
Church Membership (Name of church, city) _____					

AUTHORIZED TO PICK-UP

Please list all persons who are **authorized to take your child from the facility**. (Please notify your child's teacher and the office if there are any updates to special custodial specification.)

_____	_____	_____	_____
Name	Address	Phone	Relationship
_____	_____	_____	_____
Name	Address	Phone	Relationship
_____	_____	_____	_____
Name	Address	Phone	Relationship



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EMERGENCY CONTACTS

Name _____	Address _____	Phone _____	Relationship _____
Name _____	Address _____	Phone _____	Relationship _____
Name _____	Address _____	Phone _____	Relationship _____

EMERGENCY MEDICAL CONSENT INFORMATION FORM

Doctor _____ Address _____ Phone# _____

Dentist _____ Address _____ Phone# _____

Hospital Preference: _____

Does your child have health insurance: Yes _____ No _____ If yes _____

Policy Name _____ Policy # _____ Phone _____

Has your child been diagnosed with asthma? Yes _____ No _____

Any known allergies Yes ___ No ___ If yes, explain _____

Any daily administered medications _____

*****Does your child need or receive special services?** Yes _____ no _____ If so, please attach a diagnosis or IEP

Special Health Conditions yes _____ no _____ If yes, explain _____

This is to certify that for the period of continuous enrollment, I hereby constitute and appoint Wesley Christian Academy a ministry of the First United Methodist Church as my true lawful attorney, for the purpose of authorizing medical treatment to, and the performance procedure determined to be necessary after consultation with the Emergency or Family Physician.

By signing below, I hereby agree to all terms set forth by Wesley Christian Academy a ministry of the First United Methodist Church, and verify that I have received the above items and that all information on this enrollment form is complete and accurate.

Signature of Parent/Guardian

Date

Print Name



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For incoming Kindergarten students or newly enrolled students:

FORMS NEEDED IN OFFICE UPON STARTING SCHOOL

_____ **Copy of Birth Certificate (if student is entering Kindergarten or new to WCA)**

_____ **School Entry Health Exam***

_____ **Florida Certification of Immunization***

_____ **Any legal documentation if parents are divorced/separated**

***Both the School Entry Health Exam and the Florida Certification of Immunization can be obtained from your child's pediatrician and must be valid (not expired).**

Tuition and Fee Schedule

Admissions Testing Fee	\$25	New students, due at time of testing
Technology Fee	\$100	Due by June 1 st , 2021
Field Trip Fee	\$65 (K-3 rd) \$125 (4 th -5 th)	Due by September 1 st , 2021
Enrollment Fee	\$600	Due in 3 installments of \$200 on 2/1/2021, 4/1/2021, 6/1/2021
Annual Tuition	\$5500	Can be broken into 10 monthly payments of \$550 (August – May)
Annual Tuition 6 th Grade	\$5000	Can be broken into 10 monthly payments of \$500 (August – May)

Tuition

Tuition can be divided into 10 monthly payments from August to May. The first payment is due on August 1st, 2021. Each payment after that is due by the 1st of each month. Tuition may be paid by cash, check made payable to WCA, or electronic payment transfer.

Fees

Admissions testing, technology, field trip, and enrollment fees are **NON-REFUNDABLE**. Admissions testing fee is due at the time of testing. Enrollment fee of \$600 per child is due in 3 installments. The installments are due on the dates listed below:

Feb. 1st - \$200
April 1st - \$200
June 1st - \$200

Scholarship recipients are responsible for any fees **NOT** covered by the scholarship or if funds are exhausted at the time of billing.

Withdrawal Policy

Wesley Christian Academy is a non-profit organization that organizes its yearly budget upon the students who have committed to WCA educational services each school year. **Therefore, early withdrawal of a student will result in payment of the remainder of the semester or \$250.00 (whichever amount is greater).** Semester one is considered the first and second nine-week grading periods. Semester two is considered the third and fourth nine-week grading periods. **An exit interview is required with administration and finance department at which time formal withdrawal paperwork is signed. Withdrawal is not considered finalized until the above procedures have taken place.**

Student's Name (Print): _____

Parent's Name (Print): _____

Parent's Signature: _____ Date: _____



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Elementary Financial Agreement

This agreement is to reiterate the financial obligations stated in the 2021-2022 Handbook for WCA.

Tuition

There is an annual tuition for each student at Wesley Christian Academy which is conveniently broken down into 10 equal payments for our parents. This tuition is due on the 1st of every month starting with the first payment due on August 1, 2021 and the last payment due on May 1, 2022.

On the 11th day of the month, regardless of the day of the week, a \$25.00 late fee will be assessed per student for any outstanding fees that have not been paid. If payment is not made in full with the above late fee by last day of the month, an additional \$50.00 late fee will be assessed per student. Any account reaching more than 60 days past due, the student will be released from the school.

Fees & Refund Policies

Admission testing fees and enrollment fees are all NON-REFUNDABLE.

If a parent chooses to withdraw the student from the school and there is a refund due to the family, refunds can take up to 30 days from the child's last day or 30 days from the exit interview depending on the situation.

All fees must be paid in full by the end of the year in order to release final report cards and records of each student. Please refer to the withdrawal policy in the Handbook.

Payments can be made online through Headmaster with a checking account or in the office with a check, cash or money order.

The custodial parent who signs the student up for attendance at WCA is the financial responsibility partner for the child. If the parent has an agreement with the other parent for tuition payments, we will gladly accept payments from the other party. However, any unpaid balances will be the sole responsibility of the enrolling parent.

I have read the above guidelines and agree to this financial agreement. I understand if payments or arrangements have not been made to WCA, the school shall have the right to legal action for the collection of such fees. I will also be responsible for all costs of collection, including court cost and attorney's fees.

Student's Name (Print): _____

Parent's Name (Print): _____

Parent's Signature: _____ Date: _____

Statement of Cooperation and Honor Code

Parents: Please read the following statements carefully and sign below to indicate your agreement.

Wesley Christian Academy believes that a positive and constructive working relationship between the school and a student's parents or guardians and the student is essential to the accomplishment of the school's mission.

We/I hereby affirm that we/I have read the Parent/Student Handbook and discussed its policies with my student.

We/I certify that we consent to and will submit to all governing policies of the school, including all applicable policies in the Parent/Student Handbook. As such, We/I will not take to social media nor encourage other families to do so should conflict arise with the school faculty or administrators. We/I will pledge to follow the Matthew 18 principle.

We/I understand that the standards of the school do not tolerate profanity, obscenity in word or action, dishonor to Word of God, disrespect to the personnel of the school, or continued disobedience to the established policies of the school.

We/I understand that the services of the school are engaged by mutual consent, and that either the school or We/I reserve the right to terminate any or all services at any time. We/I understand that this Handbook does not contractually bind Wesley Christian Academy and is subject to change without notice by decision of Wesley Christian Academy's governing body.

Admission to the school is a privilege, not a right, and admission for one school year does not guarantee automatic admission for future school years.

Parent/Guardian's Name (Print): _____

Parent/Guardian's Signature: _____ Date: _____

Student Code of Conduct – Saints Pledge

I, _____, agree to follow the principles of this pledge to honor a Christian community of caring, and to take responsibility for my own actions.

SAFETY: I will work toward making my school a safe Christian place to learn that is free of bullying, teasing and name-calling.

ATTITUDE: I will have a positive attitude about myself and others by being an encourager.

INTEGRITY: I will strive to do my best with integrity.

NOBLE: I will be noble by thinking about the needs of others.

TOLERANCE: I will be tolerant of those who are different than I am because Jesus loves them also.

SERVANTHOOD: I will look for ways to show the love of Christ by serving others.

Student's Name (Print) Student's Signature Date

Elementary Health & Safety Plan

WAIVER OF LIABILITY AND HEALTH SCREENING AGREEMENT

I/we understand that Wesley Christian Academy and The First United Methodist Church of Clermont (WCA/FUMC) cannot protect my child/student and/or me from risks, which may be encountered as a result of my child attending the school and/or participating in any school-sponsored program. I/we realize there are natural, mechanical, and environmental conditions and hazards which independently or in combination with any activities engaged in while participating in this program may result in the exposure to certain risks including exposure to coronavirus (COVID-19), or other biological agents, virus or similar bacteriological agent, and the risk of being quarantined, or illness that may result in medical care, hospitalization or death.

I hereby state that I, on behalf of my child/student and myself, am an adult, over the age of 18, and legally competent to sign this form. I understand these inherent risks and dangers involved with participation in the school providing their services and acknowledge the existence of risks which are not obvious or predictable, and hereby intend this release to extend to injury or loss which results from both obvious or predictable risks, as well as risks that are unpredictable and not obvious and to extend to myself and my child/student, as applicable.

I hereby agree not to enter the campus of WCA/FUMC nor permit my child/student to enter the campus of WCA/FUMC if I/they have exhibited or been in contact with another person who has exhibited any of the symptoms currently listed by the Center for Disease Control and Prevention within the previous 14 days.

In consideration of myself and my child/student, I/we, and any legal representatives, heirs and assigns, hereby release, waive, and discharge Wesley Christian Academy, its officers, directors, employees, agents, and representatives from all liability for any loss or damage, and any claim or damages resulting therefrom, on account of any injury, illness or exposure to and/or contracting the coronavirus (COVID-19) or other biological agents, virus or similar bacteriological agent by me or my child/student attendance at and participation in the preschool, elementary, and/or afterschool program, including any medical expenses. Injury and/or death.

I agree to indemnify Wesley Christian Academy and The First United Methodist Church of Clermont, its officers, directors, employees, agents, and representatives from any loss, liability, damage, or cost that may be incurred due to my child/student participation in the aforementioned program, whether caused by the negligence of WCA/FUMC or otherwise. I fully understand, on my behalf, and behalf of my child/student the risks associated with the aforementioned participation and assume any risk associated therewith.

This notice, release and indemnity agreement contains the entire agreement between and among the parties hereto, and the terms of this release are contractual and not a mere recital.

The parties to this agreement hereby agree that the interpretation and enforceability of this Release shall be governed by the laws of the State of Florida.

I expressly agree that this release, waiver, and indemnity agreement is intended to be as broad and inclusive as permitted by applicable laws and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

Elementary Health & Safety Plan

WAIVER OF LIABILITY AND HEALTH SCREENING AGREEMENT Continued

I understand that by signing this agreement, I am giving up on behalf of my child/student and myself certain legal rights and remedies including the right for my child/student and/or myself to recover damages in the event of death, personal and/or bodily injury of any kind, property loss or damage, expenses of any nature whatsoever including attorney's fees, and other losses that my student(s) or that I may sustain in association with my child's participation in the program.

I HAVE CAREFULLY READ THE FOREGOING RELEASE AND KNOW AND UNDERSTAND THE CONTENTS THEREOF. I SIGN THIS RELEASE VOLUNTARILY AS MY FREE ACT WITH FULL KNOWLEDGE OF ITS SIGNIFICANCE, INTENDING TO BE LEGALLY BOUND THEREBY.

Student's Name (Print): _____

Parent's Name (Print): _____

Parent's Signature: _____ Date: _____



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Consent & Acknowledgement

Parent-Student Handbook Acknowledgment: This is to acknowledge that I have read a copy of the Parent-Student Handbook from Wesley Christian Academy, a ministry of First United Methodist Church. I understand that it is my responsibility to read, understand, become familiar and comply with all of the handbook policies and procedures. The Parent-Student Handbook is our website at wesleychristianacademy.org.

_____ *initial*

Photo/Video Release: I do hereby authorize WCA to include my child in group or individual photos, video footage, digital imagery, etc. taken of the children. I acknowledge that the photos, video footage, digital imagery, etc. of my child may be used for public viewing or any form of publication (brochures, websites, advertising material, etc.) and at no time will the child's name or address be included with the exception of the use of names in the annually published yearbook.

_____ **YES** *initial*

_____ **NO** *initial*

Continuous Enrollment: I understand from the time of admissions in the Wesley Christian Academy elementary school, my child will be considered enrolled at WCA unless otherwise notified by the parent.

_____ *initial*

Field Trip Permission: I am granting permission for my child to participate in field trips planned and authorized by WCA.

_____ *initial*

Child's Name _____ Date _____

Parent's Signature _____