

CUTLER RIDGE CHRISTIAN ACADEMY

10301 Caribbean Boulevard Miami, FL 33189 (305) 251-1534

Application for Re-Enrollment 2018 - 2019

ODAY'S DATE:/ GRADE ENTERING:			
Student Information:			
Name: Last	First		iddle
Last	FIISt	IVI	laale
□ Male □ Female Age: Date o	of Birth:	Birthplace:	
Race:		Soc. Sec.#:	
Home Phone:			
Preferred Home Address:			
Street	Apt. #	City	Zip Code
Preferred Mailing Address:			
Street	Apt. #	City	Zip Code
Student lives with □ Both Parents □ Mot (Please provide school with any			
Does your child take any medication on a re	egular basis?		
f yes, please comment on the name, freque	ency of medication taken, a	and the purpose:	

Parent/Guardian Information:

	Parent 1	Parent 2	Legal Guardian / Other
Title (Mr., Mrs., Dr.)			
Last Name			
First Name			
Relationship to Student			
Marital Status			
Address			
Home Phone			
Cell Phone			
Occupation			
Employer			
Work Phone			
E-Mail Address			
General Health Student	Information:	to you regularly attend?	
General Health Student ndicate allergies (please	Information: list specifics):		
General Health Student ndicate allergies (please Food:	Information: list specifics):	Medications:	
General Health Student ndicate allergies (please Food: Plants:	Information: list specifics):	Medications:	
General Health Student ndicate allergies (please Food: Plants: Any physical disabilities?	Information: list specifics): □Yes □No If yes, p	Medications: _ Other: blease explain:	
General Health Student ndicate allergies (please Food: Plants: Any physical disabilities? Does your child need to v	Information: list specifics): □Yes □No If yes, p	Medications: Other: please explain: Yes □No All of the tir	

Medications:

When any medication needs to be given to students, these medications must be in packaging from the pharmacy with the doctor's instructions printed on the current label. A Medical Release Form must also be completed by the parent. Medical Release Forms are available in the school office and require both the doctor and parent's signature. All medications must be taken in the presence of designated office personnel.

Information:

	Name	Phone Number / Ext.	Address
Physician/Doctor			
Preferred Hospital			

Emergency Contact:

Persons to contact in an emergency (with authorization to pick up student) in case parent is not available: (These individuals also have authority to pick-up our child if we are unavailable and emergency/weather conditions arise which warrant closing the school.)

Name	Phone	Alt. Phone	Relationship to student	Address

I HAVE READ AND AGREE WITH THE SCHOOL'S STATEMENT OF FAITH. I HAVE ALSO REVIEWED A COPY OF THE CRCA PARENT/STUDENT HANDBOOK AND WILL ADHERE TO THE POLICIES STATED IN THE HANDBOOK. I WILL ALSO ENCOURAGE MY CHILD(REN) TO SUPPORT AND ABIDE BY THE RULES AND REGULATIONS OF CUTLER RIDGE CHRISTIAN ACADEMY.

Parent/Guardian Signature:	Date:
Print Name:	
I, (the student) agree to abide by Cutler Ridge Christian Academy'	s rules of conduct and dress code.
Student's Signature:	Date:

Financial Agreement Form 2018-2019



Tuition payments are due by the 1st of the month. A Late Charge of \$30.00 will be assessed if account balance is not received by the 10th. No exceptions will be made to this policy. If payment is not received by the 10th of the month, the student(s) will automatically be placed on financial suspension and will not be admitted to class, until such time that all payments due have been made. The account must be current before the following can occur: receive his/her report card and/or transcripts, take school semester exams, attend school field trips, or participate in graduation.

If you have an extenuating circumstance that will prevent you from adhering to this policy, you must provide an explanation in writing and may be asked to provide additional documentation for verification. <u>Any special</u> request needs to be approved by the School Administration on an individual basis.

There are several methods of payment accepted: Cash, Checks, or Credit Card (Visa or Mastercard). You may choose to complete and submit the Credit Card Payment Form authorizing CRCA to automatically charge all monthly payments on your account to the credit card on file.

All fees and tuition payments are non-refundable. STUDENT NAME(S): GRADE GRADE _____ GRADE ____ GRADE I am selecting the following tuition payment plan for the **Academic Year 2018-2019**: _____ Full Year Plan, All Grades (due by August 1, 2018) 11 Month Payment Plan (July 1st – May 1st) **10 Month Payment Plan** (August 1st – May 1st) OFFICE USE ONLY: SU My signature below indicates that I have carefully reviewed the aforementioned, fully understand my financial obligations to Cutler Ridge Christian Academy and my willingness to cooperate fully. Furthermore, I understand that this will be the payment schedule I will be expected to adhere to for Academic Year 2018-2019. Parent/Guardian Signature: ______ Date: _____ Print Name: Parent Email for Billing Matters: ______

THIS FORM MUST BE SIGNED AND RETURNED WITH YOUR REGISTRATION.

CREDIT CARD PAYMENT SELECTION FORM



ACADEMIC YEAR: 2018-2019

CONTRACTUAL AGREEMENT WITH CUTLER RIDGE CHRISTIAN ACADEMY

I hereby authorize Cutler Ridge Christian Academy to charge my monthly statement balance or the amount indicated below to my credit card account. I understand that my card will be charged on the first business day of each month for the amount indicated below. I also understand that I will be charged a \$3.50 processing fee each time my credit card is charged.

Please note: Expiration date must be current in order for the transaction to	be processed.
Please check one:	
Credit Card: [] VISA [] MasterCard	
V. CODE (REVERSE SIDE OF CREDIT CARD - LAST THREE DIGI (V. Code is required)	TS)
Credit Card Account Number	
Expiration Date/	
Name of Cardholder (Please Print Clearly)	
Billing Address	
City State	Zip Code (*Zip Code is required
Telephone Number of Cardholder	
Signature of Credit Card Holder	//
Choose one: Account balance \$ (specific amount)	
STUDENT NAME(S):	
	GRADE
	GRADE
	GRADE
	GRADE

FINANCIAL INFORMATION SHEET

2018 - 2019



Pre-K4	\$3,000.00 annual tuition	1 st – 5 th Grade	\$6,365.00 annual tuition
Tuition in 11 payments (July – M	ay) \$272.73/monthly	Tuition in 11 payments (July – M	ay) \$578.63/monthly
(7:00 a.m. – 6:00 p.m.)			
Registration Fee	\$300.00	Registration Fee	\$300.00
Curriculum Fee	\$150 due July 2 nd	Curriculum Fee	\$425 due July 2 nd
School Improvement Fee	\$175 due September 3 rd	School Improvement Fee	\$175 due September 3 rd
		4b 4b	
Kindergarten	\$6,165.00 annual tuition	6 th – 8 th Grade	\$6,665.00 annual tuition
Tuition in 11 payments (July – M	ay) \$560.45/monthly	Tuition in 11 payments (July – M	ay) \$605.90/monthly
	•		
Registration Fee	\$300.00	Registration Fee	\$300.00
1 0			
Curriculum Fee	\$375 due July 2 nd	Curriculum Fee	\$450 due July 2 nd
School Improvement Fee	\$175 due September 3 rd	School Improvement Fee	\$175 due September 3 rd

ALL TUITION AND FEE PAYMENTS ARE NON-REFUNDABLE.

A \$50.00 late fee will be applied if fees mentioned above are paid after the due date.

Registration Fee – due at time of registration. Save 50% off of the Registration Fee if registered by 2/2/18.

School Hours

<u>Pre-K4 – K5</u> - 8:15 a.m. – 2:45 p.m. 1st – 8th <u>Grade</u> - 8:15 a.m. – 3:00 p.m.

DISCOUNTS AVAILABLE

*Discounts may not be combined.

Full Year Tuition: 5% discount if paid by August 1, 2018

Sibling Discount: Second Student's Annual Tuition Reduction \$250.00

Third Student's Annual Tuition Reduction \$500.00 Fourth Student's Annual Tuition Reduction 10%

Referral Discount: 10% discount on tuition is given to any CRCA family that refers a new family enrolling

> their child(ren) in CRCA and is in school for at least 1 semester. The Referral Form must be completed in the school office in order for the discount to be applied at the end of the

second quarter.

School Lunch Information

Our Cougar Café serves breakfast and lunch each school day. Additional information regarding our menu options and prices can be found on the Lunchroom Information Form. Middle School students may also purchase a snack during their daily mid-morning break. Students may bring lunch money to school each day OR setup a pre-payment account. Please note that student meals may NOT be charged to student's accounts.

After School Care Fees

After School Care fees for Pre-K4 students are included in the tuition. Students enrolled in K5 – 8th grade who require After School Care on a regular basis should enroll in the After School Care program. This program is available from 3:00 pm – 6:00 pm and payment is due at the end of each week. Payments for After School Care are \$4.00 per hour for a single child and \$6.00 per hour for families with two or more children. Advance payments for After School Care accounts are accepted. A \$5.00 late fee will be assessed on all overdue accounts and will result in discontinuation of After School Care services.

After School Care is not available past 6:00 pm. **Students picked up after 6:00 p.m. will be charged \$1.00 per minute after 6:00 p.m.** Any student in grades K5 - 8th grade not picked up within the 15 minutes of dismissal time will be billed at the hourly rate of \$4.00 per hour or any part thereof.

General Information

The monthly tuition payments will be due by the 1st of each month.

Late Fees/NSF Fees

If payment is received in the Finance Department after the 10th of the month, a \$30 late fee will be charged to your account. All NSF checks will be charged a \$30 fee. If a second check is returned, remaining payments must be made using a money order, cashier's check or credit card. School records **will not** be released unless your account is current.

Financial Scholarships

Families with students on financial scholarships are responsible to pay the difference that is not covered by the scholarship amount. Financial scholarships may not be combined with any school discount offered.

Entrance Exams

All incoming K5 – 8th grade students who wish to apply for admission into our school must complete an entrance exam. This evaluation, along with other pertinent information such as standardized test results and report cards, permits us to determine if our program will be able to meet the needs of the prospective student. <u>A fee \$30.00 is charged</u> for the processing of the paperwork. Taking the entrance exam does not assure acceptance into our school. All student information and assessments are reviewed by the school's Admissions Committee to determine eligibility and acceptance into CRCA.

Age Requirements

For entrance into our school, we follow the guidelines set forth by the State of Florida which are:

- K4- Must be 4 on or before September 1st of that academic year
- Kindergarten- Must be 5 on or before September 1st of that academic year
- First Grade- Must be 6 on or before September 1st of that academic year and must have successfully completed Kindergarten

Withdrawals

Should you withdraw your child(ren) from our school, the current balance, if any, must be paid in cash or cashier's check. All tuition and fee payments are **non-refundable**. *A \$25.00 withdrawal fee will be charged at time of withdrawal*. Student records will not be released until all fees and payments have been paid.

Cutler Ridge Christian Academy is a ministry of First Baptist Church of Cutler Ridge. Our school provides a supportive, challenging, and caring environment for education. Our school is fully accredited by the Florida Association of Christian Colleges and Schools.

All families must sign a Statement of Financial Responsibility Form, Physician's Authorization Form, and Statement of Cooperation Form. CRCA admits students of any race, color, national and ethnic origin to all the rights, privileges, programs, and activities generally accorded to or made available to students at the school. It does not discriminate on the basis of race, color, national or ethnic origin in administration or its policies, admission policies, scholarship, and loan programs.