

Arrows Academy™

2020-2021 Registration (New Student)

Office Use			
Spot Available:	Y / N		
Recv:		Time:	
Ck#:		Amount:	
ETt:		ED:	RW:

1st choice of campus: Columbia / Lexington (circle one)

If 1st choice is not available, are you interested in a different campus? Yes / No (circle one)

Student Information

Full Name: _____
First Middle Last Preferred Name

Birthdate: _____ Grade Entering: _____ Gender: _____

Email: _____

Yes/ No Does your student have a cell phone (If yes, will he/she be bringing it to school? Yes/ No)
(Students are required to check-in their phones when at school)

Yes/ No Has your child been homeschooled? If yes, list grades: _____

Yes/ No Has your child attended school? If yes, list school & grades: _____

If you select "YES" to any questions below, please complete the additional Reg Form B found on the website under Start Here – Forms and attach it to this page and attach it to this page

Yes/ No Has your child ever been suspended or expelled from school? (*If yes, please explain on Reg Form B)

Yes/ No Has your student had to repeat any grades? (*If yes, please explain on Reg Form B)

Yes/ No Has your child had *behavior difficulties* or been involved in illegal activity? (*If yes, please explain on Reg Form B)

Yes/ No Are there any *unusual / current factors* in your child's life that may impact their performance / behavior at school (i.e. absence of a parent, death or divorce, disability of a parent, adoption, etc)? (*If yes, please explain on Reg Form B)

Yes/ No Does your child have a learning disability or are there any other educational/ behavioral / emotional concerns? (*If yes, please explain on Reg Form B)

*Additional forms can be found on our website

Parent Information

Father's Name _____
First Middle Last

Home Phone: _____ Cell Phone: _____

Email: _____ Work Phone: _____

Employer: _____ Title: _____

Mother's Name _____
First Middle Last

Home Phone: _____ Cell Phone: _____

Email: _____ Work Phone: _____

Employer: _____ Title: _____

Home Address: _____ City: _____ Zip: _____

Home Church: _____

*Please attach any additional addresses or custody information if applicable.

Photography Consent

I hereby grant Arrows Academy permission to use my child's image in any media pertaining to the school such as newsletter, website, yearbook, and news articles. Yes No Initials: _____

Arrows Academy admits students of any race, color, national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national and ethnic origin in administration of its educational policies, admissions policies, scholarship and loan programs, and athletic and other school-administered programs.

Medical Information

If you select "YES" to any questions below, please complete the additional medical form found on the website and attach it to this page. One form per student.

Yes/ No Does student(s) have a physical health condition or food allergy of which the school should be aware?

Yes/ No Does your child have an allergy that requires an EpiPen? If yes, an EpiPen is required to be stored at Arrows during the academic school year.

Medical Release

For the 2020-2021 school year, I _____, parent/guardian of Arrows Academy student(s) _____, do hereby authorize and request that any adult staff of Arrows Academy seek immediate medical attention of a physician or hospital or EMS in emergencies requiring such medical attention; and this authorizes said staff to designate any physician or hospital or EMS to treat in cases of emergencies such as injury by accident or sickness while in their care. I understand that the cost of such treatment is my responsibility. I further verify that health insurance is provided by:

Insurance Company Name: _____ Name of Insured: _____
Policy Number: _____ Group Number: _____
Insurance Company Address & Phone: _____

Accountability Group

Please list your intended accountability group for the 20-21 school year: _____

*All high school students are required to join the Arrows Accountability Group.

Financial Agreement

By signing below, you agree you have read and understand the following:

1. Any student with outstanding fees/tuition will not be allowed to attend classes until account is current.
2. No transfer of tuition or fees to other families is allowed.
3. The remainder of the year's tuition will be due if a child withdraws for any reason.
4. A fee of \$25.00 will be assessed for all returned checks.
5. I understand that this form and registration fee of \$100 (**\$90 this year 😊 as we celebrate our 10 year anniversary with \$10 off registration**) per student will only reserve my child's spot at Arrows Academy. The enrollment process will not be complete until I have completed the hold harmless form and paid the first month or full year's tuition plus enrollment fees. Enrollment fees are non-refundable and non-transferable. **Registration fees will only be refundable if we make a campus change that does not suit your family.**
6. Tuition is pro-rated and only refunded if/when another student fills the vacated spot.
7. By signing below, I am stating that I understand that after the first payment is made, I will be responsible for the year's tuition regardless of whether my child completes the year or not.

Parent signature

Date

Check which payment option you are choosing:

_____ One payment due by July (5% discount) _____ 10 monthly payments starting July

*All payments are made using the FACTS tuition management system. You must register by July 1st in order for your payment plan to begin payments in July. Detail instructions and due dates will be provided in your enrollment packet.

Attachments:

- _____ I have attached the **\$90** registration fee (check or money order)/student made payable to Arrows Academy. (If class is full, your check will not be deposited). **(Current Arrows families will be billed via FACTS incidentals in lieu of sending in a check.)**
- _____ I am interested in being an assistant in exchange for a tuition credit. I have included my application with this registration form (found on our website).