



Application for Admission

School Year _____

FOR OFFICE USE ONLY
 Application Fee Check # _____ Cash Amount \$ _____ Date Received _____
 Interviewed on _____ by _____
 Date Name

NCA admits students of any race, color, national and ethnic origin to all rights, privileges, programs and activities made available to students of the school. It does not discriminate on the basis of race, color, national & ethnic origin in the administration of its educational policies, scholarships, athletics, or any other school administered programs.

BINDING ARBITRATION AGREEMENT

- I understand if my child is not accepted, the registration fee will not be refunded.
- I agree to pay the tuition assessed by NCA at the rate or rates from time-to-time in effect. If my child is withdrawn from NCA for any reason after the start of school, I shall pay and be responsible for tuition according to the policy stated in the Student/Family Handbook. I understand that my obligation to pay the tuition and fees is for the full academic year is unconditional and that after the deposit is made no portion of tuition and fees paid or outstanding will be refunded or cancelled in the event of absence, withdrawal, or dismissal from the school.
- Students may not be permitted to take exams nor will report cards, progress reports, or transcripts be released until tuition and all other financial accounts with the school are paid and current. NCA may report any unpaid accounts to the IRS as taxable income and may report any unpaid accounts to any credit bureau. NCA reserves the right to collect late fees, interest, & collection fees related to any late payments.
- I consent to NCA's obtaining my credit report at my sole cost and expense if NCA determines, in its sole and exclusive discretion, to be needed.
- I will execute and deliver to NCA, at its request, any and all documentation necessary or convenient for NCA to obtain from any school, academy, institute, other educational institution any and all information, data, records, documentation, or other materials relating to my child's current or previous education.
- NCA may capture, photograph, record, video, take, use, reuse, publish and republish my child's appearance, likeness, depiction, voice, or form, by means of photographic equipment, portraits, videos, DVD, CD-ROM, audio recording, computers, and any other techniques or media, and to publish, republish, use or reuse any printed matter in conjunction therewith (collectively, the "Works"). My child and I have irrevocably disclaimed any right whatsoever we might have or claim to have to the copyright in the "Works". My child and I irrevocably assign any rights whatsoever we may have in the "Works" to NCA in perpetuity.
- The undersigned are all Christians and believe that the Bible commands them to make every effort to live at peace and to resolve disputes with each other in private or within the Christian church (see Matt 18:15-20; 1Cor 6:1-8). Therefore, the parties agree that any claim or dispute arising from or related in any way to the covenants and agreements to which this Binding Arbitration Agreement is attached, the relationship of parent, school and student, shall be settled by biblically based mediation and, if necessary, legally binding arbitration in accordance with the Rules of Procedure for Christian Conciliation of the Institute for Christian Conciliation, a division of Peacemaker® Ministries. Judgment upon an arbitration decision may be entered in any court otherwise having jurisdiction. The parties understand that these methods shall be the sole remedy for any controversy or claim described in this Binding Arbitration Agreement and expressly waive their right to file a lawsuit in any civil court against one another for such disputes, except to enforce an arbitration decision.

 Printed Name of Parent or Guardian Signature Date

 Printed Name of Parent or Guardian Signature Date

Before me personally appeared _____ (Name) for the purpose herein expressed.
 To me executed said instrument on _____ (Date) for the purpose herein expressed.
 _____ Name Verification _____
 _____ Personally Known Notary Signature Date

Please Print Legibly

Child's Legal Name _____
 First MI Last
 Goes by _____ Gender Male Female
 Child's Social Security Number _____ - _____ - _____ Grade Level _____
 Birth Date ____/____/____ US Citizen Yes No Alien Resident Yes No

CHILD LIVES WITH Both Natural Parents Mother Father Other
 Guardian Grandparents Mother / Father – Step Parent

APPLYING FOR

Pre K-3 (8:15-11:45) 2 day 3 day 5 day
Pre K-4 (8:15-11:45) 3 day 5 day
Grade: (Please circle one) K 1 2 3 4
 5 6 7 8

EXTENDED DAY PROGRAM (optional)
 Before School Program 7:00–8:15 a.m.
 Mon Tues Wed Thur Fri
 Lunch Bunch 11:45 a.m. – 3:00 p.m. (Pre-K only)
 Mon Tues Wed Thur Fri
 After School Program 3:00–5:30 p.m.
 Mon Tues Wed Thur Fri

PARENT INFORMATION

Father's name _____ Social Security # _____ - _____ - _____
 Legal Last First MI
 Custodial parent? Yes No Home Phone # () _____ Cell Phone # () _____
 Address _____ City _____ State _____ Zip _____
 Employer _____ Occupation _____ Work Phone # () _____
 Work Address _____ Email address _____
 Authorized to call in an Emergency? Yes No Authorized to pick up child? Yes No

Mother's name _____ Social Security # _____ - _____ - _____
 Legal Last First MI
 Custodial parent? Yes No Home Phone # () _____ Cell Phone # () _____
 Address _____ City _____ State _____ Zip _____
 Employer _____ Occupation _____ Work Phone # () _____
 Work Address _____ Email address _____
 Authorized to call in an Emergency? Yes No Authorized to pick up child? Yes No

FAMILY HISTORY

Marital Relationship Natural Adopted Parents are Married & Together in Home
 Natural Mother Deceased Natural Father Deceased Separated Legally Divorced

Is either parent forbidden by a court order from having equal access to the child or the school records? Yes No

Written legal documentation is required prior to enrollment

Name of legal guardian if other than parent _____
 Are both parents aware of this application? Yes No

Sibling's First & Last Names	Name	Attends School	Grade/Age
_____	_____	_____	_____
_____	_____	_____	_____

STEP PARENT INFORMATION

Step - Father's name _____ Social Security # _____ - _____ - _____
 Legal Last First MI
 Custodial parent? Yes No Home Phone # () _____ Cell Phone # () _____
 Address _____ City _____ State _____ Zip _____
 Employer _____ Occupation _____ Work Phone # () _____
 Work Address _____ Email address _____
 Authorized to call in an emergency? Yes No Authorized to pick up child? Yes No

Step - Mother's name _____ Social Security # _____ - _____ - _____
 Legal Last First MI
 Custodial parent? Yes No Home Phone # () _____ Cell Phone # () _____
 Address _____ City _____ State _____ Zip _____
 Employer _____ Occupation _____ Work Phone # () _____
 Work Address _____ Email address _____
 Authorized to call in an emergency? Yes No Authorized to pick up child? Yes No

GRANDPARENT INFORMATION

If different names, addresses, or phone numbers please add information at bottom or put on separate piece of paper.

Maternal Grandfather's name _____ Phone # () _____
Maternal Grandmother's name _____ Cell # () _____
 Address _____ City _____ State _____ Zip _____
 Authorized to call in an emergency? Yes No Authorized to pick up child? Yes No

Paternal Grandfather's name _____ Phone # () _____
Paternal Grandmother's name _____ Cell # () _____
 Address _____ City _____ State _____ Zip _____
 Authorized to call in an Emergency? Yes No Authorized to pick up child? Yes No

MEDICAL INFORMATION

Doctor's Name & Ph. _____
 Dentist's Name & Ph. _____
 Medical Conditions _____

ADDITIONAL EMERGENCY CONTACTS

Name _____
 Relationship _____
 Hm Phone # () _____
 Work Phone # () _____
 Cell Phone # () _____
 Authorized to call in an emergency? Yes No
 Authorized to pick child up? Yes No

Name _____
 Relationship _____
 Hm Phone # () _____
 Work Phone # () _____
 Cell Phone # () _____
 Authorized to call in an emergency? Yes No
 Authorized to pick child up? Yes No

GENERAL INFORMATION

- Is it your intent to have your child graduate from Naples Christian Academy?
 Yes No If No, please explain. _____
- The admissions policies of the school require that at least one parent must be a professed follower of Jesus Christ.
 Does your family meet this requirement? Yes No If No, please explain. _____
- Have you read and do you agree with the Statement of Faith and Family Covenant? _____
- What church does your family attend? _____
- Who do you believe Jesus Christ to be and what significance does He hold in your life? _____

DOCUMENTATION REQUIREMENT

The application cannot be processed without this information attached.
 Notarized and complete Application
 Application Fee of \$150 (Non-refundable)
 Copy of Birth Certificate
 Copy of Social Security Card
 Church Reference or Pastoral Recommendation
 Copy of former school records / report card

FINANCIAL

NAME OF PERSON(S) RESPONSIBLE FOR TUITION & FEES: _____

NON-REFUNDABLE APPLICATION FEE \$150.00. MUST BE ATTACHED.

CHOICE OF PAYMENT PLAN

- ANNUAL PAYMENT
- MONTHLY PAYMENT PLAN
 AUTOMATIC WITHDRAWAL - Requires additional fees and Tuition Refund Plan Insurance
- QUARTERLY PAYMENT PLAN
 AUTOMATIC WITHDRAWAL - Requires additional fees and Tuition Refund Plan Insurance

SERVICE COMMITMENT

- Pre K VIP Family Service Program (10 hours) or
- Pre K VIP Annual Fee Option (\$175.00)
- K - 8 VIP Family Service Program (20 hours) or
- K - 8 VIP Annual Fee Option (\$350.00)

After acceptance and prior to the student attending classes, the following forms must be received before the child can be fully enrolled and attend school.
 Family/Student Covenant
 Authorization to dispense meds
 Immunization Form (obtained from doctor)
 Well Child Form (obtained from doctor)
 Medical P/U form