

## Registration Information for 2016-2017

## FT CAROLINE BAPTIST ACADEMY

*(Please note our rates reflect a \$15 increase after remaining the same for the last two years.)*

Registration for current students, their siblings and our church members begins on **February 1st, 2016.**

We will open our registration to the community on **February 16, 2016.**

- ⇒ An application must be completed for all programs. (two's, threes and VPK)
- ⇒ **All students new and returning must complete an application.**
- ⇒ **A non refundable \$100 registration fee is required for all Twos, and Threes** and Certificate of Eligibility is required for all VPK students. Contact ELC of Duval at 208-2044 or [www.VPKDuval.org](http://www.VPKDuval.org).  
(We must have a COE for all children within 2 weeks from the date the ELC begins issuing.)
- ⇒ If registering for the extended lunch bunch program a **\$35 registration fee is required.** (Spaces are limited in lunch bunch)
- ⇒ We will Start school when the public schools begin. (VPK classes 8:30 a.m.– 11:45a.m.) Preschool 2/3's attend 8:30 –11:30 a.m.
- ⇒ Children will remain in the same class for a full year and must re-enroll yearly for next age level.

# of children/ # in class staff	Age Group– must be age by Sept 1st	Days available	Registration fee Due with the applica- tion. Non refundable	Supply Fee-due each year in June	Equal Monthly payment	Tuition based on total days attended throughout year
8 students/2 staff	Two day 2's	T & TH	\$100	\$90	\$250pullups/ \$230underpants	\$2500pull ups/ \$2300 underpants
8 students/2 staff	Three day 2's	M, W, F	\$100	\$100	\$305pull-ups /\$285underpants	\$3050pull ups/ \$2850 underpants
8 students/2 staff	Five day 2's	M-F	\$100	\$110	\$540pull- ups/\$525underpants	\$5400 pull ups/ \$5250 underpants
12students/2 staff	Two day 3's	T & Th	\$100	\$90	\$215	\$2150
12 students/2 staff	Three day 3's	M, W & F	\$100	\$100	\$250	\$2500
12 students/2 staff	Five day 3's	M - F	\$100	\$110	\$395.	\$3950
Up to 16 stu- dents/2 staff	VPK	M - F	Certificate of Eligibility required	Asked to bring in supplies.	8:30-11:45 State funded	State pays
Up to 16 stu- dents/2 staff	VPK	3 day class T, W, TH	Certificate of Eligibility required	Asked to bring in supplies.	8:30-1:30 State funded	State pays

### **Payments will begin in July and end in April.** *(No increases in our lunch bunch fees)*

Tuition and lunch bunch fees remain the same monthly, regardless of the number of school days within the month. We have based fees on total days for the year.

A \$35 registration fee is required to enroll in the lunch bunch program, this is required for any child enrolled on a regular basis or to use the occasional stay throughout the year.

Preschool lunch bunch is available for morning preschool and VPK classes. It runs from end of class until 2 p.m. (occasional daily on a space available basis only \$20. per day).

5 days per week \$130 per month

4 days per week \$120 per month

3 days per week \$110 per month

2 days per week \$100 per month

**Lunch Bunch program will not begin until the 1st day in September.**

**Our lunch bunch classes do not nap. If your child requires a nap each day this program is not a good choice for him/her.**



FORT CAROLINE BAPTIST ACADEMY  
Preschool Admission Application

**Preschool classes—**

**8:30-11:30**

- 2 day Two year olds
- 3 day Two year olds
- 5 day Two year olds
- 2 day Three year olds
- 3 day Three year olds
- 5 day Three year olds

**VPK Classes**

- VPK Fours **Monday-Friday**  
8:30—11:45 a.m.
- VPK Fours 3-day class**  
8:30—1:30 p.m.

**CIRCLE DAYS CHILD STAYS**

**Lunch Bunch needed M T W TH F**

Lunch Bunch for a.m. classes only 11:30—2 p.m.

Hours: am classes 8:30 - 11:30/11:45

**FEES PAID**

AMT PD \_\_\_\_\_

CK# \_\_\_\_\_

DATE \_\_\_\_\_

BANK \_\_\_\_\_

Certificate of Eligibility

# \_\_\_\_\_

**GENERAL INFORMATION (Please complete application in its entirety)**

Child's Name \_\_\_\_\_ Name called at home \_\_\_\_\_

Date of Birth \_\_\_\_\_ Present age \_\_\_\_\_ Sex: Male Female

Address \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Father's Name \_\_\_\_\_ Occupation \_\_\_\_\_

Business address \_\_\_\_\_ Phone \_\_\_\_\_ Date of birth \_\_\_\_\_

Mother's Name \_\_\_\_\_ Occupation \_\_\_\_\_

Business address \_\_\_\_\_ Phone \_\_\_\_\_ Date of birth \_\_\_\_\_

\* **Cell or Mobile phone (Mom)** \_\_\_\_\_ **(Dad)** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Secondary Email address:** \_\_\_\_\_ **We primarily communicate using email.**

**RELIGIOUS AFFILIATION**

Family religious preference \_\_\_\_\_ Church membership \_\_\_\_\_

**EMERGENCY INFORMATION**

Name of child's doctor \_\_\_\_\_ phone \_\_\_\_\_

**ALLERGIES (FOOD ETC....)** \_\_\_\_\_ **Medication needed: YES / NO**

Does your child have any speech, hearing or vision problems? \_\_\_\_\_

Hospitalizations? \_\_\_\_\_ Operations? \_\_\_\_\_

Other illnesses? \_\_\_\_\_

**Local person authorized to act for parents in emergency (e.g.—babysitter, relative, etc...)**

**Name** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Address** \_\_\_\_\_ **Business Phone** \_\_\_\_\_

**FAMILY SITUATION**

Child lives with \_\_\_\_\_ both parents \_\_\_\_\_ Mother \_\_\_\_\_ Father \_\_\_\_\_ Other (Explain)

Names and ages of other children in the home. \_\_\_\_\_

Has your child attended a preschool program before? \_\_\_\_\_

Name of school and previous teacher. \_\_\_\_\_

**SOCIAL AND PHYSICAL GROWTH:**

Please address the following concerning your Child: Is he or she? Does he/she have?

- 1. Right or left handed?\_\_\_\_\_
- 2. Well coordinated?\_\_\_\_\_
- 3. Clumsy?\_\_\_\_\_
- 4. Good with hands?\_\_\_\_\_
- 5. Aggressive?\_\_\_\_\_
- 6. Dare-devil behavior?\_\_\_\_\_
- 7. Impulsive?\_\_\_\_\_
- 8. Unusual fears?\_\_\_\_\_
- 9. Excitable?\_\_\_\_\_
- 10. Restless?\_\_\_\_\_
- 11. Shy?\_\_\_\_\_
- 12. Domineering?\_\_\_\_\_
- 13. Happy?\_\_\_\_\_

Does your child have any problems that concern you?\_\_\_\_\_

Do you feel your child is developmentally on target? \_\_\_\_\_

What do you feel are his/her special abilities or capabilities?\_\_\_\_\_

What do you consider a challenge for your child? \_\_\_\_\_

**EXPERIENCES WITH OTHERS**

What are some of the ways your child plays at home?\_\_\_\_\_

Favorite toys?\_\_\_\_\_

Special interests?\_\_\_\_\_

Favorite TV program?\_\_\_\_\_

Favorite foods?\_\_\_\_\_

Does he/she play well with other children their age?\_\_\_\_\_

How does he/she react when he/she does not get his/her way?\_\_\_\_\_

Is child enrolled in a special group (dancing, art, sport etc...)?\_\_\_\_\_

How often do you read to your child?\_\_\_\_\_

Tell us some fun things you enjoy with your child.\_\_\_\_\_

What are your expectations of our program?\_\_\_\_\_

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*Thank You*