

FAITH Registration Form 2016-2017

Parents' name(s) _____

Street _____ City _____ Zip _____

Home phone _____

Work phone _____ (Whose? _____)

Cell phone _____ (Whose? _____)

Email Address most often checked (required) _____

Student's Name _____ (Preferred Name?) _____

Age (as of 9-1-16) _____ Grade level _____ Birth date _____

Student's Name _____ (Preferred Name?) _____

Age (as of 9-1-16) _____ Grade level _____ Birth date _____

Student's Name _____ (Preferred Name?) _____

Age (as of 9-1-16) _____ Grade level _____ Birth date _____

Student's Name _____ (Preferred Name?) _____

Age (as of 9-1-16) _____
) _____ Grade level _____ Birth date _____

Student's Name _____ (Preferred Name?) _____

Age (as of 9-1-16) _____ Grade level _____ Birth date _____

If your child has any mental, emotional or physical difficulty which will be helpful for us to know about in facilitating their participation, please explain on a separate sheet of paper and attach it to this form.

My signature below indicates that I have read and understand the policies and obligations of parents and students involved in FAITH as explained in this form.

Signature _____ Date _____

Instructions for completing registration form

- Parent Involvement Opportunities form is on page 3. At present all parents are required to be on premises and have a job. Your participation with us is greatly appreciated! THANKS!
- Attach a check for \$135 for holding your spot. Tuition payment arrangements (lump sum or monthly) need to be finalized by May 15, 2016. If at any point during the summer you plan to withdraw from the program prompt notice would be appreciated.

FAITH Fee Policies

Tuition

The program bases its annual budget on the number of students enrolled in the program. Parents are paying teachers directly as agreed. Therefore, we ask that parents commit to pay that tuition for their children for the entire school year (7 months). Tuition for the 2016-2017 year is \$375/family. Tuition for a family bringing only one child is \$200. If you are bringing more than 4 children please add \$25/child.

Exceptions to this policy include:

- *Death of a parent
- *Moving more than 30 miles from location
- *Parent becoming unemployed

No exceptions are given for the following reasons:

- *Child re-enrolled in school
- *Child is tired of the program
- *Child has too many other activities
- *Choosing to leave the program due to disagreement or conflict

Please prayerfully consider this commitment before applying. You will be held liable for payment for the full year once the program has begun. Students dismissed from the program for any reason during the year are still held liable for the full amount of tuition due.

Tuition Payment Options

Tuition may be paid in full or monthly. Payments are due on the first meeting of each month. Monthly payments are \$53.57 starting in September continuing through March.

Teachers rely on their tuition checks for their income. They are working hard on your child's behalf. Although financial hardships arise, we ask you to hold this responsibility in high priority and pay the teachers as agreed. If you are more than 2 weeks late, we will ask you to discontinue attending until payment can be arranged. Please contact us if there is a problem.

Fees required for each family:

- Registration fees *\$135 due 5/15* Registration fees are NON-REFUNDABLE
- Registration fees include: Building fee of \$50, insurance fees of \$35 and a materials fee of \$50.
- In order to keep costs reasonable for all families we may at times ask for materials to be brought from home to supplement the materials we are able to provide.

We would like have opportunities during the year to participate in different fund raisers. These are to offset or enhance any program costs we have. This would depend on the availability of a parent volunteer coordinator.

A parent's signature on the front absolves FAITH Fine Arts Program and Southside Bible Fellowship or any of their staff, volunteers and assistants from any liability if any member of the family, including the parents,

incurs injury while at premises. It authorizes the director to seek emergency medical assistance, if necessary, for the enrolled children. Efforts will always be made to contact the family in case of emergency.

Turn in paperwork with payment to Kristina Mitchell or Mail this form and your registration payment to:

FAITH Fine Arts Program
197 East Rd. Weare, NH 03281

Adult Involvement Opportunities 2015-2016

Parent's name _____ Home Phone _____