



2020-2021 ENROLLMENT FORM

STUDENT(S) INFORMATION:

Full Name LAST, FIRST, MIDDLE	Date of Birth	Gender (M/F)	Grade Level Requested	Student Email Address	Student Cell Phone #

Home Church: _____ Youth Group Attended: _____

FAMILY INFORMATION:

Family Mailing Address		Home Telephone #	
Father's/Guardian's Name		Mother's/Guardian's Name	
Father's Email Address		Mother's Email Address	
Father's Cell Phone #	Do you wish to receive text messages from ECA? <input type="checkbox"/> Yes <input type="checkbox"/> No	Mother's Cell Phone #	Do you wish to receive text messages from ECA? <input type="checkbox"/> Yes <input type="checkbox"/> No
Father Employed By	Father's Position/Title	Mother Employed By	Mother's Position/Title
Father's Work Phone #	If self-employed, type of business	Mother's Work Phone #	If self-employed, type of business

Father's Marital Status: Married Widowed Divorced Separated Remarried Single
If Remarried, Name of Spouse: _____

Mother's Marital Status: Married Widowed Divorced Separated Remarried Single
If Remarried, Name of Spouse: _____

If both parents do not have full custody of the child(ren) then a copy of a court's custody ruling will need to be on file at Eukarya Christian Academy.

EXTENDED CARE:

I will need PM Clubhouse {after care: 3:30-6:00 PM}	<input type="checkbox"/> No	<input type="checkbox"/> Yes: <input type="checkbox"/> Per Diem or <input type="checkbox"/> Fulltime
I will need care at Eukarya Kings Cubs {on snow days and school holidays}	<input type="checkbox"/> No	<input type="checkbox"/> Yes: <input type="checkbox"/> Per Diem or <input type="checkbox"/> Fulltime

PUBLICATION/PHOTO RELEASE:

The school may solicit various media outlets for coverage of school events and students, such as the ECA website, a newsletter, school videos, and other school publications and presentations. If you wish to opt out of any use of your child(ren)'s image over which we have control you must initial and date below.

I DO NOT GIVE MY APPROVAL for using my child's image for publications, etc. over which ECA has control, with the exception of the school yearbook.

Parent/Guardian Initial Here: _____ Date: _____

I/We certify that all of the information on this enrollment application is correct and complete. I/We have disclosed all information to the administration of Eukarya Christian Academy that could be considered pertinent or helpful to our child's education and formation. I/We acknowledge that in addition to this enrollment application that we must also review and/or sign the Parent Student Handbook and form, the Tuition and Fees Schedule, the Academy Contract, the Authorization to Pick Up form, the Field Trip Permission form, the Medical Information form, and the Medication Description form.

Father/Guardian Signature

Date

Mother/Guardian Signature

Date

Eukarya Family Center Inc. admits students of any race, color, creed, and ethnic origin to all the rights and privileges, programs, and activities generally accorded or made available to the students of the school. We do not discriminate on the basis of race, color, national and ethnic origin in administration of our educational policies, admissions policies, or any other school administered programs.