

# Layton Christian Academy

## Yearly Registration Form for the school year 2011-2012

- Registration fees are non-refundable with the exception of job-related transfers out of the area.
- This form and your registration fee will hold your position on the priority/waiting list.
- New Families. You need to complete and turn in the LCA application within 5 days of registering.
- Priority is given to returning students who complete the registration process and turn in the \$100.00 (discounted) registration fee on or before March 4, 2011. After that date the families must pay the full registration fee of \$400. On March 4, 2011, positions will be opened up to new students on the waiting list.
- Should LCA not be able to accommodate your child by September 13, 2011, please call the office and request that your fees be refunded. However, if a space becomes available by this date and you choose not to take the space, your fees will not be refunded. Completion of this form is not a guarantee of admission to LCA.
- Families are still subject to normal admission policies.
- Please see the Tuition/Fee schedule for further financial information.

Families please check if:  
 New Address  
 New Phone #  
 I do not want my phone # published in the directory

Family Information- Please Print Clearly

Parents Name: \_\_\_\_\_ Church Attended: \_\_\_\_\_

Address	City	Zip	Home Phone
_____	_____	_____	Preschool <input type="checkbox"/> AM <input type="checkbox"/> PM Must be completely potty-trained. (Preference is not guaranteed) Extended Care Package Needed <input type="checkbox"/> Yes <input type="checkbox"/> No  EC Package Number _____
Cell/Work Phone-Mother	Cell/Work Phone-Dad		
_____			
<i>Parent's E-mail for school news and information</i>			

STUDENT NAME	GENDER	GRADE (11-12)	BIRTHDATE
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I have read this form and agree to abide by the directives contained in it. I understand all registration fees are due with this form and are non-refundable except for job-related transfers. I understand if I choose to make monthly installments that I must set those payments up to be paid by EFT, or if not I will be charged a \$25 monthly service fee. There is a \$30.00 fee on all returned checks or denied EFT payments. I agree to pay, in addition to my account balance, for all attorney fees, courts costs, collection agency fees, commissions and charges in the amount up to 50% of the account balance should my account be turned over for collection. I also understand that my family is responsible for 36 service hours per school year.

\_\_\_\_\_  
Signature Date