

Applicant's Name _____ Grade _____

Aftercare needed: Yes or No



MOUNTAIN HOME CHRISTIAN ACADEMY

Re-Enrollment Packet

1st - 4th

Thank you for considering Mountain Home Christian Academy in the educational future of your child. Our program is one that will provide for a well-rounded education with a strong Christian emphasis. We care about your child and feel that it will be our honored responsibility to be a positive influence on his or her life in all areas- spiritual, intellectual, physical, and social. We look forward to being of service to you. MHCA is nondiscriminatory with regard to race, color, sex, or national origin.

For office use: Date Received _____



Mountain Home Christian Academy

Requirements for Returning Students – Grades 1-4

To re-enroll a student at MHCA, the following information must be submitted:

1. ___ An up to date immunization record
2. ___ A completed Student Information Card (attached)
3. ___ A Commitment Form signed by parents (attached)
4. ___ A signed Permission/Release Form (attached)
5. ___ Enrollment fee (April 3-May 12 \$65.00; after May 12 \$100.00)
(includes registration, student insurance, Spring testing fee & T-shirt)
6. ___ Signed Financial Agreement (attached)
7. ___ Read the MHCA Handbook & sign the MHCA Commitment to Excellence Form

Parental Commitment to Mountain Home Christian Academy

In signing this application, we acknowledge our commitment to

1. Support the policies and Christian Philosophy of Education of MHCA
 2. Accept teacher and administrative authority
 3. Follow God's line of authority when differences of opinion exist. We will go first to the person with whom we have the problem. If not resolved, we will go with the individual to his/her supervisor. (Matthew 18:15-17)
 4. Attend parent meetings and lend our support to the programs at MHCA as able
 5. Volunteer time, talent, and treasure as able
 6. Pay tuition when due
- Withdrawals- If we voluntarily withdraw or are requested to withdraw from the school, we are responsible to pay our account in full, realizing that registration and book fees are non-refundable. I understand that a full month's tuition will be charged if withdrawal is before the last day of the month. **Final grades, credits, and /or diplomas will be held until accounts are paid in full.**
 - Our student may participate in all school-sponsored activities, field trips, etc. (list exceptions, if any)

 - We understand our student will be under a 9-week probation period.

Signatures of commitment

Father or legal guardian

Date

Mother or legal guardian

Date

Note: If student lives with both parents/guardians, both parents/guardians must sign.

Permission/Release Form

Please check the following information as it applies

- I give permission to Mountain Home Christian Academy to use photos of my child(ren) for Academy announcement or promotional materials including but not limited to: Newsletters, brochures, yearbooks, Academy website, newspaper.

- The following information may be included in the Parent Directory

Parent's Name(s) _____
Address _____
Phone Numbers (home) _____ (cell) _____
Email Address _____
Student's name/grade _____

- MHCA Activity Release Form

Your child's class may participate in field trips throughout the school year. By signing this form, you are acknowledging the guidelines set forth by MHCA while your child is not on school property due to field trips.

I give Mountain Home Christian Academy permission for my child to take part in all school activities, including bus trips, sports activities, and school sponsored trips away from the school premises

- Computer Access and Use

I understand that computer access and use is designed for educational purposes. While MHCA has taken precautions to eliminate controversial material, I recognize it may be impossible for MHCA to restrict access to all controversial and inappropriate material. I accept full responsibility for supervision if and when my child's use is not in a school setting. I have discussed the terms of this authorization with my child. I hereby request that my child be allowed access to MHCA's network including Internet.

I do hereby agree to hold Mountain Home Christian Academy and its agents and employees, harmless from any and all liability, actions, causes of actions, claims, expenses, and damages on account of injury to my child or property which I now have or which may arise in the future in connection with the activity or participation in any other associated activities.

*I expressly agree that this release, waiver, and indemnity agreement is intended to be broad and inclusive as permitted by the law of the **State of Arkansas** and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect. This release contains the entire agreement between the parties hereto and the terms of this release are contractual and not a mere recital.*

My signature on this form shall constitute an informed and knowing waiver as required by law. I acknowledge that I have carefully read this agreement, waiver, and release and fully understand its contents. I am aware that this release of liability is a contract between myself and MHCA.

Parent/guardian Signature: _____ Date: _____

FINANCIAL AGREEMENT

By and between Mountain Home Christian Academy and the parents/guardians of the following students:

Student Name	Grade
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

A. Registration Fee

It is understood that the filing of the enrollment application and payment of the registration fee with MHCA is used to determine the number of teachers necessary and determine the commitment of other financial resources. After the registration fees are paid, if the application is withdrawn by the parents/guardians of the child(ren), for any reason, we understand that this fee is **not refundable or transferable**. Should the parents/guardians be required by their employer to transfer from the Mountain Home area, MHCA agrees to refund the registration fee only if the applicable school year has not started.

B. Testing Fee

If applicable, we agree to pay standardized testing fees which are **nonrefundable**. This fee is currently \$25 and included in each student's enrollment fee.

C. Tuition

It is the mission of MHCA to glorify God by assisting families in the Christ-centered, biblically-directed education of their children. The parents/guardians agree to pay **100%** of the tuition using the Fee Schedule, which is incorporated in this document, and in accordance with the following financial policies:

1. Tuition may be paid annually, semi-annually, or a 10 month plan (Aug-May). Annual and semi-annual payment plans may be paid by check **only if paid by the first day of school for each applicable semester.** *USE OF THE AUTOMATIC BANK DRAFT is the PREFERRED method of monthly payment.* Monthly payments may be made over a 10-month period (August to May). **If a student attends any portion of the month, the entire tuition charge for that month is due.** The parents/guardians agree to complete the attached Payment Plan Authorization Form for payment of all tuition and fees.
2. Accounts not paid by the 10th of the month in which they are due will be considered delinquent and shall be assessed a \$20.00 late fee for that month. Returned checks and bank drafts will be assessed the late fee *plus* a \$25.00 returned check fee for a total of \$45.00. Stop payments put on drafts will incur the \$20.00 late fee. *Any account that has a late payment more than twice will be **required** to use the Automatic Bank Draft. This policy will be strictly enforced.*
3. Families with delinquent accounts will not receive report cards, transcripts, or diplomas until all financial obligations to MHCA are paid **in full or a payment schedule is in effect**. Deviations from an effective payment schedule will result in additional fees.
4. Students whose parents/guardians have an outstanding obligation to MCHA from a previous school year will not be permitted to start school the next year until that obligation is paid in full or a payment schedule has been approved by the Business Office and is in effect when school starts.

Initials

NOTICE OF NONDISCRIMINATORY ACCEPTANCE POLICY

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Mountain Home Christian Academy admits students of any race, color, nationality and ethnic origin

5. Students whose parents/guardians have an outstanding balance that is not paid by the end of the month will not be allowed to return to school until it is paid or payment arrangements have been approved through the administration. Online communication access (such as Engrade, Renweb or other provider) will be de-activated until the Business Office approves re-activation.
6. If you have a financial emergency and are temporarily unable to pay, please call the Business Office immediately.
7. We agree that we are financially responsible for the payment of this account either **jointly and severally**.
8. Changes to this agreement must be submitted in writing to the Business Office and approved by Administration.

A copy of the Financial Policies is printed in the Student Handbook/Policy Manual.

I have read Mountain Home Christian Academy's Financial Policies and the Financial Agreement and will comply with such.

Primary Responsibility	Date
Secondary Responsibility	Date
MHCA Representative	Date

Initials

Payment Plan Options/Authorization Form

Payment Schedule Options

Please check one:

- Annual (August 5th) ___ by check
- Semi-Annual (August 5th and January 5th) ___ by check
- 10 Month (August – May) - **Automatic Draft (ACH) **Preferred Method**
- 10 Month (August – May) - ___by check

Authorization for ACH Electronic Payments

Please complete this ACH enrollment form **and** attach a voided check. By completing this form you authorize Mountain Home Christian Academy to debit your bank account for the payment of tuition and fees according to the payment terms specified in this enrollment contract.

Drafts returned NSF will not be redrafted. You will be required to submit payment to the Business Office within ten (10) days or a \$20.00 late fee will be added to the \$25.00 NSF charge.

If your account information changes it is your responsibility to notify the Business Office at least three (3) business days prior to the draft date. Late fees and NSF charges will apply if the draft is returned.

Payor (“Your”) Information

First Name

Last Name

Address

City,

State

Zip

Please choose a draft date for **monthly** withdrawal:

___ 5th day of the month

___ 10th day of the month

I hereby authorize Mountain Home Christian Academy to debit my:

___ Checking Account

___ Savings Account

Signature

Date

Attach Voided Check Here

.....

Attached Voided Check Here

.....

Initials

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