

New Jerusalem Christian Academy

Child's Name:		Grade:	
Address:		City:	State & Zip:
Home Phone #:	Sex:		DOB:
S.S. #:	Ethnic Origin:		Allergies:
Child's Doctor:	Phone Number:		

Father's Name:			
Address:		City:	State & Zip:
Home Phone:	Work:		Cell:
Employer:	Pick up allowed () YES () NO		Email:

Mother's Name:			
Address:		City:	State & Zip:
Home Phone:	Work:		Cell:
Employer:	Pick up allowed () YES () NO		Email:

Who has legal custody of the child?		
Is there anyone who may NOT pick up your child?		
People to notify in case of an emergency and /or pick up your child other than parent/guardian:		
1)	Relationship:	Phone:
2)	Relationship:	Phone:
3)	Relationship:	Phone:

School attended last year: _____ Fax: _____

City _____ State: _____ Phone: _____

How did you hear about our school? _____ Face book _____ Church (Church Name: _____)
 _____ Internet _____ Friend (Students Name: _____)

New Jerusalem Christian Academy

Parent Pledge

NJCA ARTICLES OF FAITH

1. We believe the Bible to be the inspired and only infallible Word of God.
2. We believe that there is one God, revealed in three persons: The Father, The Son and the Holy Spirit.
3. We believe that Jesus is God come in flesh and that He is both divine and human.
4. We believe in the saving power of the blood of Jesus and His imputed righteousness.
5. We believe in the bodily resurrection of Jesus Christ.
6. We believe that the Lord Himself shall come down from heaven with a mighty shout and with the soul stirring cry of the Archangel and the great trumpet call of God that the dead in Christ shall raise first. The believers that remain on the earth will be caught up with them in the clouds to meet the Lord in the air and remain with him forever.
7. We believe in the visible, bodily return of Christ Jesus to this earth to judge the world.
8. We believe that the terms of salvation are repentance toward God for sin and a personal heartfelt faith on the Lord Jesus Christ which results in regeneration of the person. This salvation is entirely by grace through faith.
9. We believe in the resurrection of both the saved and the lost. The saved unto resurrection of life with Jesus Christ and the lost unto resurrection of eternal separation from God.
10. We believe that God created the institution of marriage between a man and a woman. According to His word in Genesis 2:18-25.

IN SIGNING AND SUBMITTING THIS APPLICATION, I AGREE THAT:

1. My child must meet the academic and department standards in order to be accepted at NJCA and to continue each semester.
2. When registering at NJCA, I chose to abide by the rules and regulations set forth by the school.
3. The school reserves the right to dismiss any student who does not respect its spiritual standards or cooperate in the educational process.
4. The Administration has full responsibility for placing my child in the proper grade.
5. The School has full discretion in the classroom discipline of my child, which includes detention, suspension and expulsion from the school program.
6. My cooperation is expected in: a) regular tuition payments, b) practical help, c) faithful prayer, d) participation in school functions, e) support of the teachers and school, f) PTM attendance, g) fundraisers .
7. I understand that monthly tuition payments are due on the 15th of each calendar month and are considered delinquent after the 20th calendar day at which time a \$25 late charge per student will be added to my account. If the account is not current by the first of the following month, the child will not be admitted to class. I also understand that report cards, transcripts and other records may be withheld unless financial accounts are current.
8. My child will go on scheduled field trips and other school activities.
9. In case of emergency when neither parent can be reached, I do hereby give permission for my child to receive medical care as necessary.
10. **Registration fee is non-refundable unless the school determines that they cannot accept submitted application. In the case of a non-accepted applicant, NJCA will retain \$25.00 from the registration fee. OTHERWISE, ALL FEES ARE NON-REFUNDABLE/NON-TRANSFERABLE.**

EMERGENCY INFORMATION

In case of accident or serious illness, I request that the school contact me and emergency contacts. If the school is unable to reach me or anyone who is listed, I authorize the school to call the physician indicated and to follow his instructions. If it is impossible to contact the physician, the school may make whatever arrangements that seem necessary.

Parents Signature of Approval

Date

New Jerusalem Christian Academy

Statement of Cooperation

It is my understanding that the policy for the school is to make no refunds on registration fees. I give New Jerusalem 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. I also believe that discipline is necessary for the welfare of each student, as well as for the entire school, therefore I give permission for my child's teacher and/or other agent of the school to make and enforce classroom regulation in a manner consistent with Christian principles and discipline as set forth in the Scriptures. I further agree to hold the school and its agents harmless for the liability to my child or any guardian or parent thereof because of any claims on behalf of my child against the school or any agent thereof because of injury or alleged injury to my child. Should legal action, for any reason, be taken against New Jerusalem Christian Academy or any employee or agent thereof, on my child's behalf and the school or its agent not found at fault, I agree to pay any attorney fees, court fees, damages or other costs that New Jerusalem Christian Academy or its agents should incur to defend itself against such action.

This Statement of Cooperation will be in effect for as long as my children listed (or other to be enrolled) attend New Jerusalem Christian Academy whether it be in the nursery, kindergarten, elementary, junior high, high school or summer school.

I understand that should my marital status change that it is my responsibility to have a corrected Statement of Cooperation signed and updated and delivered to New Jerusalem Christian Academy. New Jerusalem Christian Academy admits students of any race, color, and national or ethnic origin.

List names and grades of children in New Jerusalem Christian Academy:

***BOTH PARENTS MUST SIGN**

Mother: _____

Date: _____

Father: _____

Date: _____

If you are the Sole Guardian please sign below:

New Jerusalem Christian Academy

FILL IN ONLY THE INFORMATION THAT APPLIES:

Child is living with: Both parents _____ Mother _____ Father _____ Other _____

If other, please explain:

_____ Marital Status of
child's parents: Married ___ Divorced ___ Separated ___ Single ___ Remarried ___ Number of
children in the family: Brother(s) _____ Age(s) _____ / Sister(s) _____ Age(s) _____

Stepfather's or Stepmother's Name _____

Employer _____ Phone _____

Are there any languages other than English spoken in the home?

_____ What Language: _____ by
whom? _____ Does your child speak and understand the
language? _____

RELIGIOUS INVOLVMENT QUESTIONNAIRE

To better serve our school families and community, please complete the

following: Are you a member of New Jerusalem Christian Church? _____

If so what ministries are you involved in: _____

If you are NOT a member of NJCC, what religion are you:

Christian ___ Jewish ___ Other _____ what denomination? (Catholic, Methodist, etc.) _____

Are you currently active in a local congregation? _____ Name: _____

Do your children regularly attend Sunday school?

ADDITIONAL INFORMATION: _____

PROOF OF INSURANCE COVERAGE

New Jerusalem Christian Academy carries the necessary insurance coverage required for their operation. I am responsible for any other coverage for my own child. This is to verify the fact that my child _____ if fully covered by insurance.

Insurance Company _____

Policy Number _____

New Jerusalem Christian Academy

PARENT PERMISSION FORM

I hereby certify that I am the parent/guardian of _____, (Child's Name) and give my permission for the following: (Please initial each item for permission)

PHOTO RELEASE _____

I give my permission for my child's photograph or video image to be taken while he-she is in the care of New Jerusalem Christian Academy. Such images may be posted in classroom or other appropriate places. Pictures and videos may be used in center presentations, promotional materials, or distributed to staff and clients.

AUTHORIZATION FOR EMERGENCY MEDICAL CARE _____

In order to meet all legal requirements, I hereby authorize the Director of the preschool, other person in charge in the event or his/her absence, to give my consent for any and all necessary emergency medical treatment for my child while said child is in said individual's custody.

In the event of serious illness or accident, and I cannot be immediately contacted, I give permission to have child moved by ambulance or other conveyance to a doctor's office, clinic or hospital for immediate attention. I also assume responsibility for payment of the same.

AUTHORIZATION TO TRANSPORT _____

For field trips, school activities or in the event of an emergency that requires the school to vacate the premises and I and/or my contacts are unreachable, I hereby authorize the Director, or the person in charge in the event of his/her absence, to transport my child to a safe environment until I can be reached.

Parent's Signature of Approval

Date

County of Hillsborough

Sworn and subscribed before me in the aforementioned State and County this _____ day of _____, 20 __ __, personally appeared before me or has produced Florida Driver's License # _____ as identification and who did not take an oath.

Notary Public, State of Florida

New Jerusalem Christian Academy

Uniform Dress Code

Girls:

Navy or light blue NJCA polo

Plaid Skirts

Black Shoes (no laces)*

Socks (navy blue or white)

Navy blue or Khaki pants from

Nov-Feb (55 degrees or below)

No pants may be worn under skirts

Tights (winter time/navy blue or white)

Boys:

Navy or light blue NJCA polo

Navy blue or Khaki slacks/shorts (no cargo pants)

Black Shoes* (no laces for preschool)

Socks (navy blue or black)

*Students' appearances must be conservative, clean, neat and modest. Boys' hair must be clean cut, cannot touch ears or neck, boys cannot have long hair (no braids, pony tails, dread locks, or corn rolls). Any accessories must match the uniform. No big earrings of any kind. Boys are not allowed to have earrings. Girl's fingernails must be neat and clean. If nail polish is to be applied, please apply neutral, light or clear colors. Clothing that is dirty, torn, tight fitting, high water, immodest or that present a sloppy appearance is not permitted. Student appearance must reflect the highest standards of a Christian school environment. All students must wear the NJCA uniform which can be purchased through Educational Outfitters, located in Tampa. All shirts must be tucked in. If an under shirt is worn, it must be white. **Girls' skirt should be modest in length, no shorter than mid kneecap.** In cold weather, students may wear navy blue jackets, coats, or cardigan sweaters with their uniform. No jackets or sweaters with hoods.*

Please remember to label all clothing items

I, the undersigned, do understand and will abide by NJCA School of the Arts uniform policies.

Parents Signature of Approval

Date

New Jerusalem Christian Academy

VPK Eagle Care Program

Registration Fee: \$45 (non-refundable or transferable)

Book Fee: \$100 (nonrefundable or transferable)

Rates: (check one)

_____ Morning Care Program (7:15am – 9:00am) \$25/week

_____ Wrap around Care (7:15am-3:30pm) \$70/week (Book fee applies)

PAYMENT TERMS: I agree to pay New Jerusalem Christian Academy on a weekly payment schedule, IN ADVANCE. If your account falls two weeks in arrears, NJCA reserves the right to require an authorized credit card deduction for payment.

LATE PAYMENT PENALTY: All payments are due the Friday of the previous week. I agree to pay a \$15 late charge per week/per student that will be automatically charged to my account if payment is made after Monday morning each week.

ADDITIONAL TIME CHARGES: I agree to pay \$1 per minute fee per child beyond my program dismissal time. (Example: 3:31 to 3:36 = \$6).

EAGLE CARE CLOSED: Eagle Care will be closed for all major holidays and as outlined in the official school calendar. Please note that Eagle care is closed for the Christmas Holiday and Spring Break. ***I understand that the weekly fee schedules are determined with the above holidays in consideration and that the regular weekly fee is not adjusted.*** Additionally, I understand that Eagle Care may be available on days when there is no school and that an additional fee of \$15 per day will be charged for those weeks accordingly. (i.e. Teacher Training Day)

ABSENEETISM: I understand and accept that two weeks (in full week increments only) are provided for “vacation time” or can be used for extended illness. The office must be notified in writing one week prior to using “vacation time”. No payment adjustments will be made of additional absences.

WITHDRAWAL: I understand that I can withdraw my child at any time during the year for long-term or permanent absence. I also understand that re-entry requires that space be available and that a new registration fee be paid in advance.

DAILY EAGLE CARE FEE: \$25.00 per day for preschool and must be paid when child is picked up. This service may only be used if prior notice and approval are given. If a child, regardless of age is dropped off at the school prior to 7:15am and is not registered in the Eagle Care Program, the student account will be charged \$10.00 per child/day.

THIS AGREEMENT SUPERSEDES ALL PREVIOUS AGREEMENTS. I have read, understand and accept the term and conditions set forth in this Agreement.

Parents Signature of Approval

Date

New Jerusalem Christian Academy

VPK PARENT CONTRACT

Our intent is for your child to gain the greatest possible benefits from this pre-kindergarten experience. In order to ensure the best possible experience for your child, enrollment calls for the cooperation between the school and the child's family.

We ask each parent to carefully consider the following requirements for participation in our VPK program. Your signature will acknowledge that you understand and agree to abide by these guidelines.

I agree to:

1. Attend orientation, PTM and meet with my child's teacher if requested to do so.
2. Have my child to school by 9:00 am for the morning program or 12:30pm for the afternoon program.
3. Pick up my child at 12:00 pm (morning program) or 3:30 (afternoon program). I understand that I may be charged a late fee of \$1 per minute for every minute that I am late.
4. Send a written and signed excuse to my child's teacher for every absence.
5. Work cooperatively with my child's teacher and the school by agreeing to follow NJCA's student handbook.
6. Assume responsibility for my child's conduct.
7. Submit all appropriate forms and documentation by given deadlines.
8. Have my child dressed each day in accordance with the school's dress code, which requires the use of a uniform.

I understand that I will not be charged any type of fee for NJCA's Voluntary Pre-Kindergarten program (VPK). However, I understand that I will be charged as stated on the Eagle Care Program page, if I choose to register my child for wrap around care.

I understand that failure to comply with any of these guidelines may result in my child's dismissal from NJCA's VPK Program.

Parent's (or Guardian's) Signature: _____ **Date:** _____

New Jerusalem Christian Academy

VPK ATTENDANCE POLICY

Welcome to NJCA's VPK program! Our goal is to provide a high-quality prekindergarten learning experience that will prepare your child to be successful in kindergarten. To obtain this goal, we recognize that regular daily attendance is vitally important to your child's prekindergarten readiness. Our attendance policy was adopted following Florida's Voluntary Program's attendance requirements.

VPK Attendance Requirements: By initialing each item, you are verifying that you understand and will comply with each requirement.

_____ VPK hours are from 9:00am to 12:00pm (morning program) and 12:30pm to 3:30pm (afternoon program). It is important that parents adhere to the start time, as late arrivals are disruptive to the group and awkward for the arriving child.

_____ Absences cannot exceed more than 20% of the instructional days each month. The 20% does not apply to scheduled holidays or other school closings.

_____ A child with excessive absences (more than 20% each month) may jeopardize his/her continued enrollment in the VPK program.

_____ Parents are required to sign a monthly child attendance certificate, by the 3rd of each month, verifying their child's daily attendance in the program. Failure to do so could result in your child's termination from the program.

_____ If termination from the VPK program results due to inability to follow the above requirements, you will be given the option of keeping your child enrolled but paying regular tuition fee of our preschool program.

By signing below, I indicate that I have read, understand and agree to both of the above policies.

Parent's (or Guardian's) Signature: _____ **Date:** _____

Print name: _____

Telephone numbers: (____) _____ / (____) _____

Email address: _____