

FIA
First Impressions Academy
2018/19 Admissions Form

NOTE:

Registration Forms will not be processed unless fees are paid at this time.

Student's Information

First Name _____ Last Name _____

Age _____ Date of Birth _____ Gender _____

Name of Previous/Present Nursery/Grade School _____

Home Language _____ who is the child living with _____

Mother's Information

First Name _____ Last Name _____

Residential address _____
City and Zip Code _____

Telephone Numbers
(H) _____ (W) _____ (C) _____

Occupation _____ Email Address _____

Father's Information

First Name _____ Last Name _____

Residential address _____
City and Zip Code _____

Telephone Numbers
(H) _____ (W) _____ (C) _____

Occupation _____ Email Address _____

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Emergency Contact Information/ Class Schedule/ Allergies

Other adults who have permission to pick up/drop off & for emergencies

1. Name _____ Phone Number _____

Relationship to the child _____

2. Name _____ Phone Number _____

Relationship to the child _____

Allergies

Does your child have allergies? YES NO My child is allergic to _____

If my child comes into contact with this please: _____

New Students

Does your child have any known disabilities or special needs? _____

Does your child have or has ever been tested for an IEP? _____

If yes, we will need a copy of it before you complete registration

Admissions use only

Class Schedule Options

Preschool

3 year old class AM PM Full Day Ext. Full Day

4 year old class AM PM Full Day Ext. Full Day

Days of the week TH MWF M-F Lunch Bunch

Resources M T W TH F NONE

Grade School

Kindergarten First Second Third Fourth Fifth Sixth Seventh Eighth

Morning Care Full Day Ext. Full Day Sibling Hourly Care: M-F MWF TTH

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Financial Form and Contract Agreement

Preschool

I understand that the preschool year runs September through July; I understand that I must follow the withdrawal procedures as stated in the policies and procedures handbook. _____

I understand that the registration fee is nonrefundable or transferable for any reason to include a military or work relocation. _____

I understand that I must write a postdated check for September's tuition and that I have until July 15th 2018 to withdraw my child and have my check voided; after July 15th 2018 my check is no longer refundable or transferable for any reason. _____

I understand that I cannot make changes to my child's schedule after July 15th 2018; if I would like to make modifications I must give two weeks' notice and wait until October. _____

I understand that tuition is due the 1st class that my child is scheduled to attend in each month. I also understand that there will be a \$5 late fee each day after the date that tuition was due to include weekends _____

I understand that there is a late pickup policy. I will be charged \$1 per minute after the first 5 minutes for late pickup. _____

I received a copy of the policies and procedures _____

Registration Fee _____ 1st Month's Tuition _____

Print Name _____ Signature _____ Date _____