

NEW SONG CHRISTIAN ACADEMY
316 SOUTHGATE COURT
BRENTWOOD, TN 37027
A MINISTRY OF NEW SONG CHRISTIAN FELLOWSHIP
2011-2012

FAMILY APPLICATION

For office use only: Date Application Received ____ / ____ / ____

Last Name	Father's Name	Mother's Name
------------------	----------------------	----------------------

Home Street Address

City	State	Zip
------	-------	-----

Home Phone	Primary Email Address	Email Address for Financial Statements
------------	-----------------------	--

Secondary Biographical Information

Father Home Address (if different than above)	Home Phone (if different than above)
---	--------------------------------------

Mother Home Address (if different than above)	Home Phone (if different than above)
---	--------------------------------------

Occupation Information

Father's Occupation	Employer	Business/Cell Phone
---------------------	----------	---------------------

Mother's Occupation	Employer	Business/Cell Phone
---------------------	----------	---------------------

Church Information

Home Church	Attended Since
-------------	----------------

Pastor's Name	Church Phone
---------------	--------------

Emergency Contact Information

First Emergency Contact (other than parents)	Home Phone	Cell Phone
--	------------	------------

Second Emergency Contact (other than parents)	Home Phone	Cell Phone
---	------------	------------

Kindergarten must turn 5 by July 1

Oldest Student

Full name:	Preferred name:	M/F:	New Student: Y N
Birthdate:	Applying for grade:		Student email:

Second Student

Full name:	Preferred name:	M/F:	New Student: Y N
Birthdate:	Applying for grade:		Student email:

Third Student

Full name:	Preferred name:	M/F:	New Student: Y N
Birthdate:	Applying for grade:		Student email:

Fourth Student

Full name:	Preferred name:	M/F:	New Student: Y N
Birthdate:	Applying for grade:		Student email:

Grades 6-8 Elective Class Registration: The core Middle School courses include: Chapel (Bible), History, Science, and Language Arts. Please select **at least two** of the following elective classes for each Middle School student. Signing up for these electives does not guarantee a place in the class due to class size, due to academic success in the prerequisite, or due to schedule conflicts.

Saxon Math 7/6	Spanish I	Art
Saxon Math 8/7	Spanish II	Drama
Saxon Algebra *	Spanish III	Study Hall

First Student:		Second Student:		Third Student:	
Elective 1:		Elective 1:		Elective 1:	
Elective 2:		Elective 2:		Elective 2:	
Elective 3*:		Elective 3*:		Elective 3*:	
Elective 4*		Elective 4*:		Elective 4*:	

*Algebra is the first half of Saxon Algebra book. We aim to complete half to two-thirds to assure comprehension.

*Third and fourth elective class choices will be added to your monthly tuition. Please see the Schedule of Fees for those amounts.

*Drama is Tuesday's only, 3:30-5:00 and additional rehearsal times may be added before a production. 6th period Study Hall will be an extra cost if taken.

NSCA Parent Agreement

- I commit to support the vision, purpose and values of New Song Christian Fellowship.
- I commit to support and uphold the authority of the faculty and staff of NSCA.
- I commit to help my child complete all assignments & special projects, such as Science Fair.
- I commit to attend NSCA Parent Meetings/Teacher conferences as requested.
- I commit to purchase the books and materials needed for class.
- I commit our family to participate in volunteer service to NSCA.
- I commit to pay all Tuition/Fees on time.
- I commit to register my child(ren) with an umbrella school program of my choice.

Signed _____ Date _____
 (Mother's Signature)

Signed _____ Date _____
 (Father's Signature)

Umbrella Information

NSCA students **must** be registered with an umbrella school. The umbrella school will keep the permanent records for your student(s). It is important to understand that NSCA, as a home-school supplemental program, is not a school and does not maintain permanent records or provide standardized testing. Elementary and Middle School progress reports become the sole property of the parent. It is the parent's responsibility to report all educational information to the umbrella school.

Umbrella School	Address	Phone
-----------------	---------	-------

Release Form

"In the event my child becomes seriously ill or injured while on the New Song Christian Fellowship (NSCF) campus or while attending a related event, I agree that the NSCF authorities shall first make an effort to contact the responsible parent or guardian. If the student's parent or guardian cannot be reached or if NSCF authorities believe my child's condition requires emergency medical attention, NSCF authorities will use their own discretion in contacting a properly licensed and practicing physician and will follow his instructions. If in the opinion of a properly licensed practicing physician, my child needs medical or surgical services which require my consent before being supplied and I cannot be reached, I hereby authorize, appoint and empower the NSCF authorities to furnish on my behalf such written or oral authorization as may be required. Further, I release the NSCF and International Church of the Foursquare Gospel (ICFG) employees, trustees and New Song Christian Fellowship and Academy from any liability which may arise from the giving of such authorization, it being my desire that my child be furnished with such medical or surgical services as soon as reasonably possible after the need arises.

I grant permission for my child to be on campus and attend all off-site events and I grant permission for my child to be allowed to ride in a vehicle of another parent or support staff member without liability to the driver or to NSCF or ICFG and its staff."

Signed _____ Date _____
 (Mother's Signature)

Signed _____ Date _____
 (Father's Signature)

Student/Family Information

Are you new to home-schooling? If no, how many years have you homeschooled a child? _____

Why have you chosen to home-school? _____

What is the primary reason you would like to be a part of NSCA? _____

Does your family have any special family circumstances that NSCA should be aware of? (e.g. death of a parent, divorce, etc...) _____

Have any of your children had discipline problems in a school or church setting? _____

If yes, please describe the circumstances. _____

Have any of your children repeated or skipped a grade, had any remedial or accelerated instruction, or have been recommended for such? If yes, please describe the circumstances. _____

Do any of your children have academic challenges, learning disabilities, or disorders of which we should be aware?

If yes, please specify. _____

Transfer Student Information

If your student(s) is transferring to NSCA from a school or other tutorial, please list the school's current information below.

Student (s)	Present School	Address	Phone
-------------	----------------	---------	-------

Contact Person (Registrar/Guidance Counselor/Principal)

Student(s)	Present School	Address	Phone
------------	----------------	---------	-------

Contact Person (Registrar/Guidance Counselor/Principal)

Health Information

Please circle the areas that apply to your child(ren).

- | | |
|---|---|
| A. Allergies (medicine, food, insects)* | G. Kidney/Urinary Problems |
| B. Asthma/Lung Problems | H. Muscular/Orthopedic Problems |
| C. Behavior/Emotional Problems | I. Seizures |
| D. Diabetes | J. Accidents, Surgeries, Hospitalizations |
| E. Diet/Special Restrictions | K. ADD/ADHD |
| F. Heart/Blood Pressure Problems | L. Other |

Please explain any area(s) circled above. You may continue on the back of this page if needed. **Explain the extent of your child's allergies and what precautions need to be taken. **Please understand that NSCA cannot guarantee an allergy-free environment.***

Do you allow your child(ren) to request Tylenol (acetaminophen) or Motrin (ibuprofen) at school for a headache? Tylenol (acetaminophen) Yes ___ No ___ Motrin (ibuprofen) Yes ___ No ___

Do any of your children take any medication on a regular basis? YES___ NO___

If yes, please list: _____

Must medication be taken at school? YES___ NO___

If yes, please explain: _____

Name of Physician: _____ Phone: _____

Address: _____

Name of Dentist: _____ Phone: _____

Address: _____

Preferred Hospital: _____ Phone: _____

Mother Signature

Date

Father Signature

Date

NEW SONG CHRISTIAN ACADEMY TUITION AGREEMENT

2011-2012

New Song Christian Academy has a number of expenses of a continuing nature, such as faculty and administrative salaries, and supplies. In order to plan and maintain these services over the entire year, it is essential that NSCA's annual income from tuition and fees be assured.

1. Students dropping after **July 31st but before October 15th** are responsible for the first semester's tuition (August through December).
 2. Students dropping after **October 15th** are responsible for the full year's tuition (August through May).
 3. **No reduction or refund of tuition or fees** (prepaid or due) can be allowed for the absence, withdrawal, or dismissal of a student.
 4. **Pre-paid tuition is non-refundable** no matter the date your family withdraws from NSCA.
 5. Tuition is due by the **1st of each month** and is considered late on the 15th. A 10% late fee will be assessed to unpaid tuition on the 15th. Any breach of payments beyond 30 days may result in suspension of enrollment.
 6. **Automatic Bank Draft is preferred** for monthly tuition payments. Drafts occur on approximately the 5th of each month.
 7. If any unpaid balance remains at the end of the school year, a student's final progress report and any other material will not be released until the balance is paid. The student will not be permitted to return to school the next year until arrangements to pay the unpaid balance have been approved by the Administrative Team.
-

Print Family Name

Mother Signature

Date

Father Signature

Date