

Twin Tiers Christian Academy

www.TwinTiersChristianAcademy.org

1811 N Chemung Rd., PO Box K, Breesport, NY 14816
607-739-3619

NEW STUDENT ENROLLMENT APPLICATION

Date of Application _____ For School Year ____8____

Parent's Names _____

Mailing Address _____

Home Phone _____ Church Attending _____

Please list below the student(s) to be enrolled:

<u>Last Name</u>	<u>First Name</u>	<u>Middle Name</u>	<u>SS#</u>	<u>DOB</u>	<u>Gender</u>	<u>Grade Entering</u>
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1).

2).

Name & Address of last school attended:

School Phone _____ School Bus District _____
(needed for district census purposes)

Has the student(s) ever been suspended or expelled from a school? NO ____ YES ____ If yes, please explain _____

Do any of the above children have any mental or physical problems that the school or teacher should know about? Yes ____ No ____ (If yes, please use the back to explain.)

Do any of the above have a current 504 Plan or IEP? Yes ____ No ____ (If yes, please explain on the back.)

Any children registered at Horseheads Christian School? Yes ____ No ____

Statement for Parents or Guardians: In signing this application, I understand that:

1. Within the bonds of God's wisdom and love, I/we will cooperate with the administrator and teachers in the education and discipline of my children.
2. Grade placement is determined by the school administrator after consultation with the parents.
3. The school reserves the right to dismiss any student who does not or whose family does not cooperate or agree with the purpose, program, or policies of the school.
4. I/We, understand this application is a contractual agreement to pay our financial obligations on time.

In applying for the enrollment of my child, I give permission for him/her to take part in activities sponsored by the school including field trips, athletic events, concerts, etc., away from the school premises, and realizing the school does not carry liability coverage on the students, absolve the school from liability due to any injury to my child at school or during an away from school activity.

I have read the student handbook and pledge my support and agreement with the standards of conduct and discipline of Twin Tiers Christian Academy. ☐

Father (Guardian) _____ Date _____ ☐

Mother (Guardian) _____ Date _____

Office Use Only

Date Received _____ Registration Fee (\$50) _____ Reg. Fee (bal.) _____ Fam. Info. Form _____ Appl Fee _____
Medical Release _____ Student Questionnaire _____ SMART _____ Tuition Plan: 10 mo. _____, 11mo. _____, pd. in full _____ ☐