



Family Christian Academy Preschool

“Building Foundations for Faith and Learning”

Parent Agreement

Child's Name: _____ Parent's Name: _____

*Please read and initial each statement.

1. _____ I understand that weekly tuition in the amount of \$_____ is due in advance on Friday for the upcoming week.
2. _____ I understand that FCA Preschool is a full time facility and tuition is due even in the event of my child's absence.
3. _____ I understand that a one-time (**non-refundable**) New Student fee of \$160.00 is due before my child is enrolled, and that a \$175.00 (**non-refundable**) Equipment fee is due at the time of start date.
4. _____ I understand that the one-time (**non-refundable**) New Student fee of \$160.00 secures my child's spot on their class list for **three months**. If my child cannot start preschool on their scheduled start date, I must request necessary start date extensions from the Preschool Office. Unless arrangements are made with the Preschool office, I understand that the New Student fee and the corresponding classroom placement will automatically expire after three months resulting in an additional New Student fee payment for future enrollments. (Three month expiration does not pertain to New Student fees paid by expectant parents for placement in the Infant room.)
5. _____ I understand that a \$175.00 equipment fee is due on the 1st anniversary of my child's start date.
6. _____ I understand that new student fees, equipment fees, summer activity fees, and tuition are **non-refundable**.
7. _____ I understand that a summer activity fee will be charged per-family for children in K-1 through K-3 in June of each year.
8. _____ I understand that a \$5.00 late fee per day will be assessed if tuition is not paid by Monday. My child will not be allowed to return to class if payment in full is not received by Tuesday afternoon.
9. _____ I understand that a \$25.00 returned check fee will be assessed for any returned check and that after two (2) returned checks, payments must be made by cash or money order.
10. _____ I understand that a \$2.00 per minute late fee will be assessed if my child is picked up after 6:00 p.m. and \$5.00 per minute after 6:15

A Ministry of Family Worship Center
8919 World Ministry Ave * Baton Rouge, LA 70810-9099 * (225) 768-3024
P.O. Box 262550 * Baton Rouge, LA 70826-2550

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Parent Agreement cont.

11. _____ I understand that classroom placements are based on many factors including, but not limited to: age, gender, development, behavior, and availability. FCA Preschool strives to move children up to the next class as soon as is possible and appropriate. Classroom placement is at FCA Preschool's discretion.
12. _____ I understand that the preschool requires a two (2) week notice prior to withdrawal of my child.
13. _____ I understand that the preschool requires all children to maintain current medical vaccinations as defined by the state of Louisiana Department of Health and Hospitals. Immunization records must be provided prior to enrollment.
14. _____ If at any time FCA Preschool determines they can no longer accommodate the needs of my child, I understand that FCA Preschool reserves the right to dismiss my child without prior notice.

Parent/Guardian Signature _____

Date: _____