



Christian Life Academy

2017-18 Pre-K & Kindergarten Registration Form

133 Junction Rd.
Brookfield, CT 06804
(203) 775-5191
www.brookfieldcla.org

Class Applying to:
(Please check preference)

K3
 K3 (MWF) 8:15-3:10
 K3 (M-F) 8:15-3:10

K4
 K4 (MWF) 8:15-3:10
 K4 (M-F) 8:15-3:10

Kindergarten
 5 Full Days 8:15-3:10

Office Use Only:
Date Rec'd _____
Reg. Fee _____

Student's Name _____ Do they use a nickname? _____ Gender: Male / Female

Address _____ City _____ State _____ Zip _____

Phone# (____) _____ Date of Birth: ____/____/____ US Citizen: Yes No What country? _____ Ethnicity: _____

Child's First Language _____ Language Spoken at Home _____ In which country was your child born? _____

Father/Guardian's Name _____ Employer _____ Work # _____

Father/Guardian's Cell Phone # _____ Email _____ Occupation _____

Mother/Guardian's Name _____ Employer _____ Work # _____

Mother/Guardian's Cell Phone # _____ Email _____ Occupation _____

Father/Mother's address if different from above _____

Are there extenuating family or custody circumstances? _____ If so, please explain below _____

Does your family attend church? _____ If so, where? _____ Town _____

Student's Grandparents Names:

Maternal _____ Paternal _____

Address _____ Phone _____ Address _____ Phone _____

City/State/Zip _____ City/State/Zip _____

Other siblings' names & ages: _____

Has your child attended pre-school before? _____ If so, where? _____ (circle pre-school levels that apply) K3, K4, K

Please provide a brief description of his/her experience:

What other information about your child would be helpful with his/her adjustment to school?

Does your child have any special medical, behavioral, or developmental concerns? _____ If so, please provide a detailed description, including any documentation you may have and any medications taken. _____



Tuition Rates & Fees 2017-18

Registration Fees: *Registration fees are non-refundable and due at the time of registration.*

- \$80 New Students (Maximum \$150 per family)
- \$80 Returning Students, **if done before April 1st** (Maximum \$150 per Family)
~ after April 1st the registration fee will be \$125 (Maximum \$250 per Family)

Annual Tuition:

Tuition is paid in 10 monthly installments. Payments begin August 1st and finish with the last payment in May.

Non Members:	K3 & K4 (MWF) (3 Full Days)	K3, K4, and Kindergarten (5 Full Days)
1st Child	\$4,600 (\$460 Mo.)	\$5,400 (\$540 Mo.)
2nd Child	\$4,100 (\$410 Mo.)	\$4,900 (\$490 Mo.)
3rd Child	\$3,600 (\$360 Mo.)	\$4,400 (\$440 Mo.)

First Assembly Members & Pastors:	K3 & K4 (MWF) (3 Full Days)	K3, K4, and Kindergarten (5 Full Days)
1st Child	\$3,600 (\$360 Mo.)	\$4,400 (\$440 Mo.)
2nd Child	\$3,600 (\$360 Mo.)	\$4,400 (\$440 Mo.)
3rd Child	\$3,400 (\$340 Mo.)	\$3,900 (\$390 Mo.)

- Annual payments are due by August 1st. Monthly payments are due by the 10th of each month.
- Students withdrawing after August 15th will be responsible for the first month's tuition.
- Any child withdrawn after school begins is responsible for the year's tuition.
- All monthly tuition payment options require payments directly withdrawn from your checking account.
- Insufficient funds or payments received after the 10th of the month (for monthly payments) or later days past due are subject to a \$25 late fee.

Book & Supply Fees: (Maximum \$1,000 per family) *Book & Supply fee is due by July 15th.*

K3 and K4 (3 Day) = \$175 K3 and K4 (5 Day) = \$200 Kindergarten = \$250

Fundraising: \$250 for one enrolled student or \$400 for two or more attending children per family. All parents are expected to participate in fundraising & other activities that contribute to the financial well-being of the school. This requirement can be met by participating in events & activities throughout the year. Any amount remaining at the end of the school year will be billed to your account by May 31st.

Other Potential Fees:

Developmental Testing Fee: \$50 (if necessary)

K3, K4 & K Before Care & Extended Care: For Extended Care costs, please see Extended Care Application. Before Care is \$5 daily or \$50 per month. Will your child be attending the Extended Care Program? Circle Anticipated Days: M T W TH F

Anticipated Pick-up Time: _____

Will your child be attending Before Care? Yes No Not Sure (circle one)

Answering these questions does not commit you to the Extended Care or Before Care Programs at this time. It helps us with future planning. Thank you.

Marketing: How did you learn about CLA?

- Mailer Sign Driving By CLA Family: _____
- Newsletter Word of Mouth Other: _____

- I have read the attached financial policy of Christian Life Academy and I agree to the terms set forth in it, including the policy that all monies paid to Christian Life Academy are non-refundable.
- I have read the Statement of Faith, Mission, Philosophy, and Parent Handbook for Christian Life Academy and I agree to support the administration, faculty, and staff in upholding all policies as well as the mission of the school.
- I have discussed Behavior Techniques with a staff member at Christian Life Academy and or Little Blessings Childcare Center.

Signature of Parent/Guardian

Date

For questions, please call us at (203) 775-5191. Completed applications and fees may be mailed to:
Christian Life Academy, 133 Junction Road, Brookfield, CT 06804