

New Student  
 Currently Enrolled Student  
 Sibling of Enrolled Student  
 Waiting List

Office Use

Date: \_\_\_\_\_  
 Time: \_\_\_\_\_  
 Check #: \_\_\_\_\_  
 Amount: \_\_\_\_\_  
 Charge: M/C Visa Disc A/E



## LCA Secondary New Student 2020 — 2021 Enrollment Form

LakelandChristian.org  
 397 South Stemmons Freeway, Lewisville, Texas 75067  
 Phone: 972-219-3939 Fax: 972-219-9601

Child's Name (*first, middle, last*): \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Age (*on Sept. 1, 2020*): \_\_\_\_\_ Birthdate (*mo./day/yr.*): \_\_\_\_\_ Sex: M \_\_\_ F \_\_\_

Father's Name: \_\_\_\_\_ Email: \_\_\_\_\_

Occupation and Business Name: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Email: \_\_\_\_\_

Occupation and Business Name: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Name of Church \_\_\_\_\_ Previous School Attended: \_\_\_\_\_

Primary language spoken in the home: \_\_\_\_\_ Ethnicity (Optional): \_\_\_\_\_

Parent/Legal Guardian signature: \_\_\_\_\_ Date: \_\_\_\_\_

<u>Class</u>	<u>Time</u>	<u>Days</u>	<u>Annual Tuition*</u>
___ 6th Grade	8:40am - 3:45pm	M-F	\$5856 annual
___ 7th Grade	8:40am - 3:45pm	M-F	\$6300 annual
___ 8th Grade	8:40am - 3:45pm	M-F	\$6300 annual
___ 9th Grade	8:40am - 3:45pm	M-F	\$6744 annual
___ 10th Grade	8:40am - 3:45pm	M-F	\$6744 annual
___ 11th Grade	8:40am - 3:45pm	M-F	\$6744 annual
___ 12th Grade	8:40am - 3:45pm	M-F	\$6744 annual

\*See Charge Draft Authorization for payment plan options.

**To Pursue Enrollment:**

- 1) Completed Enrollment Form, Charge Draft Form (on reverse side) and applicable, **non-refundable & non-transferable Enrollment Fee** submitted to LCA Office.
- 2) New students: Receipt of transcripts and standardized testing from previous school.
- 3) New students: All enrollment forms must be completed and submitted to LCA.
- 4) First tuition payment is due on or before June 1, 2020. On June 2<sup>nd</sup> enrollment will be forfeited for non-payment and space will be awarded to the next student on the waiting list. **Tuition is completely non-refundable & non-transferable.**

**Cancellation Policy: All tuition and enrollment fees are non-refundable & non-transferable.**

I have read and understand the cancellation policy stated above.

Print Parent Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**OVER**



Name of Child: \_\_\_\_\_ Class/Grade for 2019-2020: \_\_\_\_\_

Parent Name: \_\_\_\_\_

Parent E-Mail Address: \_\_\_\_\_

Home address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Parent Home Telephone Number: \_\_\_\_\_

**ENROLLMENT FEE**

**K5-12th Enrollment Fee:**

- \$475. Non-Refundable & Non-Transferable Enrollment Fee New K5-12th Grade.  
 (Multi-child enrollment discount: 1st child—\$475, 2nd child—\$400, 3rd child—\$325, 4th child—\$0.

**Check One:**

- I am paying my Enrollment Fee by Attached Check: Payable to LCA Amount: \_\_\_\_\_  
 I am paying my Enrollment Fee with the following Charge Card: please circle VISA MC DISC AMEX  
**There will be a 3% processing fee when paying with a credit or debit card**

Name on Card: \_\_\_\_\_ Card #: \_\_\_\_\_ Exp: \_\_\_\_\_

**TUITION**

Monthly Tuition Amount: \_\_\_\_\_

**Form of Payment Option 1: There will be a 3% processing fee when paying with a credit or debit card**

Name on Charge Card: \_\_\_\_\_

Charge Card Number: \_\_\_\_\_ Expiration: \_\_\_\_\_

Charge Card Type: Mastercard \_\_\_\_\_ Visa \_\_\_\_\_ Discover \_\_\_\_\_ American Express \_\_\_\_\_

**Form of Payment Option 2:**

Name on Bank Account: \_\_\_\_\_

Bank Routing Code: \_\_\_\_\_ Bank Account Number: \_\_\_\_\_  
 (First set of numbers on bottom of check) (Second set of numbers on bottom of check)

Name of Bank: \_\_\_\_\_ Account Type: Checking \_\_\_\_\_ Savings \_\_\_\_\_

**DRAFTS / CHARGES: Begin on June 1, 2019 (non-refundable & non-transferable)**

**K5-12th Students (Kindergarten and older) beginning June 1, 2019 choose:**

Pay over 10 months \_\_\_\_\_ or pay over 12 months \_\_\_\_\_  
 (initial) (initial)

**There will be a \$20 service fee charged for any returned checks and credit cards unable to process.**

As a convenience to me, I hereby request and authorize you to charge my account for monthly tuition payable to Lakeland Christian Academy. I agree that your rights in respect to each such charge shall be the same as if it were submitted by you and signed personally by me. This authority is to remain in effect until revoked by me in writing, and until you actually receive such notice, I agree that you shall be fully protected in honoring such charges. **Tuition is non-refundable & non-transferable.**  
**Note: Any changes in this account number or status must be reported to LCA 5 business days prior to the end of the month.**

By the signature below, I acknowledge that I have read the foregoing, understand and agree to the terms.

**OVER**