

## **Holy Youth Christian Academy Registration Package 2020/2021**

Holy Youth Christian Academy is now accepting registration for Kindergarten through fifth grade for the 2020-2021 school year. We are admitting students on a first-come, first-serve basis, therefore, if interested, please fill out the attached forms and return them by June 1<sup>st</sup>, 2020 to ensure enrollment for your child.

Thank you,  
Father Angelos Bishara & Principal Shell Keim

### **Application Process and Forms**

We are delighted that you are applying for enrollment of your child(ren) at Holy Youth Christian Academy. Everything you will need for the application process is included in this packet. It is important to understand that our process is meant to facilitate the school's policy of meeting the individual needs of each child. Please review the requirements listed below and carefully fill out all the necessary forms.

Submit all required application forms at the time of registration.

#### **Bring copies of the following documents:**

- Birth Certificate
- Updated immunization records
- 5 year old physical exam for kindergarten

## **2020/2021 Tuition and Fees per Student**

**Application/Registration Fee: \$50.00**

*Due at time of registration.*

**School Supplies Fee: \$50.00**

*The annual School Supplies Fee covers the cost of your child's supplies for the year. Supplies will be provided by the school and will not be required from the parents.*

**Tuition (for HYCA Bus Riders): \$3,000.00/year (\$300.00/month)**

*Tuition is payable on the first day of school, but may be deferred to ten equal monthly installments (August - May), due on the first of each month if needed. The cost of transportation is included.*

**Tuition (for HYCA Parent Drop-Off/Pick-Up): \$2,700.00/year (\$270.00/month)**

*Tuition is payable on the first day of school, but may be deferred to ten equal monthly installments (August - May), due on the first of each month if needed. There is no transportation fee included if parents are providing daily transportation for the entirety of the school year.*

**Scholarship Information:** Through the North Carolina State Education Assistance Authority, HYCA has access to two programs that expand school choice for eligible students in kindergarten through 12th grade: Opportunity Scholarship and Disabilities Grant. Please follow the link regarding this information, which includes eligibility requirements and application instructions: <http://ncseaa.edu/K-12Grants.htm>

HYCA will be happy to discuss scholarship options with your family if needed. Please contact Fr. Angelos Bishara at the time of registration (no later than June 1st) to make an appointment. Contact information: [frangelos@holyyouthacademy.com](mailto:frangelos@holyyouthacademy.com), 919-590-9113.

### **Tuition and Fee Payment Instructions:**

All tuition and fee payments must be in an envelope, clearly marked with the first and last name of the student(s).

**Forms of payment accepted by HYCA:** personal or cashier's check, money order, or bank transfer. NO CASH OR CARD PAYMENT OFFERED AT THIS TIME. Donations may be made via cash, but cash payment for tuition and school fees is NOT accepted as of 1/1/19.

**Checks and money orders** should be made payable to Holy Youth Christian Academy, signed, dated, your phone number and address included, and student(s) name written in memo line.

**Where to remit payment:** You may remit payment in person at the HYCA front desk, by mail (to 287 Old Lystra Rd, Chapel Hill, NC 27517), or you may send this to school in your child(ren)'s homework folder to be given to the teacher. Payments should not be given to any staff outside of the school building.

**Bank transfers** through Quickbooks Payments may be made via an emailed link each month, or auto draft if set up in advance.

# HOLY YOUTH CHRISTIAN ACADEMY

# Bank Transfer Authorization Form

I authorize Holy Youth Christian Academy ("HYCA") to electronically debit my bank account according  
Business name

to the terms outlined below. I acknowledge that electronic debits against my account must comply with United States law.

**Terms of billing:**

HYCA will draft the customer's bank account on the first of each month through May 1st, 2021 for the minimum amount due per the invoice. This contract only applies to invoices for tuition and transportation. Application fees, re-enrollment fees, school supplies fees, field trip fees, etc. must be paid separately, as billed.

HYCA will discontinue auto draft after May 1st, 2021, and will contact the customer prior to the 2021-2022 school year with more billing information.

Please note that it is the customer's responsibility to ensure this form is turned in (by email at [info@holyyouthacademy.com](mailto:info@holyyouthacademy.com)) two business days prior to the due date to avoid a late payment.

If the customer has any changes in bank account information, or wishes to cancel auto-draft, it is the customer's responsibility to notify HYCA at least two days prior to the due date of the upcoming due invoice (by email at [info@holyyouthacademy.com](mailto:info@holyyouthacademy.com)).

**Customer bank account information:**

Routing number

Account number

Account type: ☐ Checking ☐ Savings ☐ Consumer ☐ Business

This payment authorization is to remain in effect until I, \_\_\_\_\_, notify  
Customer name

Holy Youth Christian Academy ("HYCA") of its cancellation by giving written notice in enough time for the  
Business name

business and receiving financial institution to have a reasonable opportunity to act on it.

Customer signature

Customer printed name

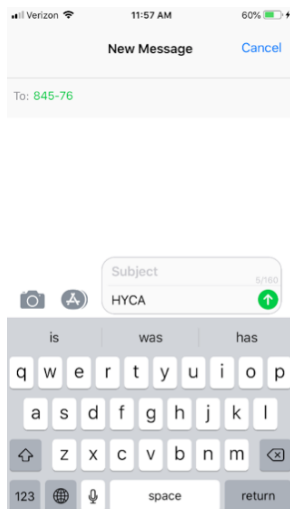
Date \_\_\_\_\_

# HOLY YOUTH CHRISTIAN ACADEMY

## Flocknote Parent Communication

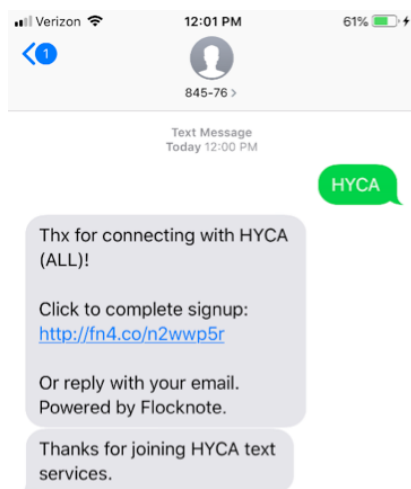
Holy Youth Christian Academy is implementing a new method for sending out communications. Please follow the steps below to sign up for the service. Sign up must be done **by October 1, 2020** to ensure you don't miss communication sent by the school. If both parents would like to sign up, they must have different emails otherwise one will overwrite the other.

**Step 1** – from your phone text the word HYCA to 84576. You will get a text back with a link.



**Step 3** – Enter your personal information.

**Step 2** – Click on the link to complete the registration.



**Step 4** – Choose the groups you would like to get notifications from. Everyone must be choose HYCA (ALL).

HOLY YOUTH CHRISTIAN ACADEMY

**Application Form (2020 - 2021)**

Registration: \_\_\_\_/\_\_\_\_/\_\_\_\_

Gender (circle one): Male / Female

Student Name: \_\_\_\_\_

*Last*

*First*

*Middle*

Grade Entering: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home phone #: \_\_\_\_\_ E-mail address: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Social Security #: \_\_\_\_-\_\_\_\_-\_\_\_\_

Mother's Name: \_\_\_\_\_ Mother's Cell #: \_\_\_\_\_

Employer: \_\_\_\_\_ Work number: \_\_\_\_\_

Mother's Social Security #: \_\_\_\_-\_\_\_\_-\_\_\_\_

Father's Name: \_\_\_\_\_ Father's Cell #: \_\_\_\_\_

Employer: \_\_\_\_\_ Work number: \_\_\_\_\_

Father's Social Security #: \_\_\_\_-\_\_\_\_-\_\_\_\_

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Last School attended: \_\_\_\_\_

School address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

School Phone #: \_\_\_\_\_ Fax#: \_\_\_\_\_

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Health Form & Medical Release

Student Name: \_\_\_\_\_

*Last*

*First*

*Middle*

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Grade: \_\_\_\_

Gender: Male / Female

Mother's Name: \_\_\_\_\_ Mother's Cell #: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Father's Cell #: \_\_\_\_\_

In case of an emergency notify (other than parent or guardian):

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

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Food or medication allergies: \_\_\_\_\_

Other allergies: \_\_\_\_\_

Health conditions: \_\_\_\_\_

Treatments: \_\_\_\_\_

Other/comments: \_\_\_\_\_

Preferred Hospital: \_\_\_\_\_

Physician's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

*In case of medical or surgical emergency, I hereby give permission to the physician selected by Holy Youth Christian Academy or his/her representative to hospitalize and secure proper treatment for my child as named above.*

*I hereby release the directors and staff of the school from all responsibility of sickness or accidents which might be incurred while attending school and its functions.*

*I hereby give permission to school designated supervisor to secure medical care and treatment in the event of an emergency. I understand that I will be contacted immediately in the event that something unforeseen happens that needs my immediate attention.*

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

HOLY YOUTH CHRISTIAN ACADEMY

**Release of Information Permission Form**

My child, \_\_\_\_\_, is applying for admission to Holy Youth Christian Academy. I

hereby authorize \_\_\_\_\_

Name of School (Current Attending)

to release his/her student records to Holy Youth Christian Academy. These records include but are not limited to: progress reports, information on the curriculum, and any other pertinent information deemed necessary. I understand that this information will be held confidential by both schools. This authorization also applies to the teacher evaluation form I will be submitting to my child's teacher.

**Parent's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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**Contractual Payment Agreement**

I \_\_\_\_\_; the parent of \_\_\_\_\_

agree and fully understand that I must pay all tuition and school fees due to Holy Youth Christian Academy on the first day of school, or equal installments on the first day of each month. I also agree and fully understand that scholarships must be obtained in advance of the school year, by June 1st, if the full tuition cannot be paid.

**Parent's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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# HOLY YOUTH CHRISTIAN ACADEMY

## Photo Release Permission Form

I, \_\_\_\_\_, parent of \_\_\_\_\_

(Print name)

(Child's name)

hereby grant permission to Holy Youth Christian Academy to take and use: Photographs and/or digital images of my child for use in news releases and/or educational materials as follows: printed publication or materials, electronic publication, or web sites. I agree that my child's name and identity: may be revealed in descriptive text or commentary in connection with the image(s). I authorize the use of these images without compensation to me. All negatives, prints, digital reproductions and shall be the property of Holy Youth Christian Academy.

**Parent's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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## Waiver of Liability Form

I understand that Holy Youth Christian Academy is not responsible to supervise my child/children before or after school hours if not enrolled in a before/aftercare program. I understand that daycare and preschool aged children are never allowed on campus without a parent/guardian/member to supervise.

I understand that Holy Youth Christian Academy does not provide insurance relative to accidents or injuries as a result of school related activities. I understand that I am responsible for the health/medical care of my child/children in the event of an injury or accident during any School activity/classes.

I understand that Holy Youth Christian Academy has a no tolerance policy for student misconduct. Students that continue to violate the conduct policies of the school may be dismissed from their class at the administration's discretion. (Initial) \_\_\_\_\_

I have read this Waiver and Release of Liability form and I understand the contents of the form.

By signing this, I waive, discharge and covenant not to sue Holy Youth Christian Academy, its teachers, staff, attorneys, employees, associates, affiliates, successors and assigns, and all other persons, firms or corporations, whether or not specifically names, herein, jointly, severally, and jointly and severally, of and from any and every claim, demand, right or cause of action, of whatever kind of nature, whether in tort, contract, or created by statute, directly or indirectly, for any injuries, damages, or losses the undersigned may incur as a result of his or her participation and involvement in Holy Youth Christian Academy.

## HOLY YOUTH CHRISTIAN ACADEMY

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*Parent's Signature*

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*Student's Name (Please Print)*

### **Nondiscrimination Policy**

Holy Youth Christian Academy admits students of any race, color, national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national and ethnic origin in administration of its educational policies, admission policies, scholarship and loan programs, and athletic and other school administered programs.