

ZTCA SAP 20\_\_ REGISTRATION FORM

DATE \_\_\_\_\_

REGISTRATION APPLICATION FEE PAID \_\_\_\_\_

PARENT NAME \_\_\_\_\_

STUDENT NAME \_\_\_\_\_

2015/2016 GRADE LEVEL \_\_\_\_\_

2016 SAP ENTRY GRADE LEVEL \_\_\_\_\_

FORMS SUBMITTED:

Registration Form	_____
Promissory Note	_____
Health Information Form	_____
Medical Statement	_____
Photo Release	_____
Handbook Statement Form	_____ (Inside Summer Handbook)
Copy of Birth Certificate	_____

**ZION TEMPLE CHRISTIAN ACADEMY  
APPLICATION FOR (S.A.P) SUMMER ACTIVITY PROGRAM 2016  
TEACHER INFORMATION SHEET**

\_\_\_\_\_  
Name

Home Phone \_\_\_\_\_

Mom's cell \_\_\_\_\_

Dad's cell \_\_\_\_\_

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
Zip

AGE \_\_\_\_\_ D.O.B. \_\_\_\_\_ Place of Birth \_\_\_\_\_ SEX \_\_\_\_\_

Child's M.D. \_\_\_\_\_ Dr.'s Phone # \_\_\_\_\_

List any physical difficulties: \_\_\_\_\_

Circle grades previously attended  
at this school: None K3 K4

K5 1st 2nd 3rd 4th 5th 6th

Current Grade Level \_\_\_\_\_

Names & grades of other children in this program:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

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

Do you wish to receive literature and/or a call from our Pastor about our church? YES OR NO

Father: \_\_\_\_\_

Employer: \_\_\_\_\_

Phone# \_\_\_\_\_

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

Mother: \_\_\_\_\_

Employer: \_\_\_\_\_

Phone# \_\_\_\_\_

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

If parents are separated, with whom does the child reside? \_\_\_\_\_

(List everyone allowed to pick up your child(ren).

**EMERGENCY CONTACTS AND PHONE NUMBERS**

<i>Name</i>	<i>Phone Number</i>	<i>Name</i>	<i>Phone Number</i>

*To assist us in our scheduling, please indicate the time you will drop-off your child in the morning and the time you will be picking your child up in the afternoon.*

Morning Drop-Off: \_\_\_\_\_ Afternoon/Evening Pick-up: \_\_\_\_\_

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Date

Fee Paid \$ \_\_\_\_\_ Date Paid \_\_\_\_\_

Dear Parent:

In order to keep Zion Temple **Summer Activity Program** afloat, all bills must be promptly paid. Please sign and return this Promissory Agreement below with your application.

**Promissory Agreement**

My child/children will be attending the ZTCA Summer Program and I agree to make regular Weekly payments of \$ \_\_\_\_\_ payable to: Zion **Temple Christian Academy Summer Activity Program**, for my child/children beginning \_\_\_\_\_ 2016 thru \_\_\_\_\_, 2016.

- 1. \_\_\_\_\_  
Child's Name
  
- 2. \_\_\_\_\_  
Child's Name
  
- 3. \_\_\_\_\_  
Child's Name

(Child's name, parent signature and date are required for the following. Please do not add or take away from any of these statements.

**DISCIPLINE STATEMENT**

I agree to authorize the Administrator, the assigned instructors of the Zion Temple Summer Activity Program to exercise authority as to control behavior and discipline over \_\_\_\_\_ while at school or during any S.A.P activity outside school as the Administrator or Instructor deem necessary.

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

**STATEMENT OF COOPERATION**

In making application for my child, it is my desire to have him/her complete the Summer Activity Program for the year 2016. It is also my understanding that the policy of the SAP is to make **no refunds on registration fees**. I also give permission for my child to take part in all SAP activities; including sports and SAP sponsored field trips away from the school premises, absolving the SAP from liability to me or my child because of any injury to my child at school or during any Summer Program activity.

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

FOR PARENT INFORMATION – May 31<sup>ST</sup> – AUGUST 5<sup>TH</sup> 2016

REGISTRATION FEE (Non-Refundable)

\$51.00 - Kindergarten thru 6<sup>TH</sup> Grade

\$51.00 - Age 3 thru Preschool

\* \* \* \* \*

**Full 10 week program students have priority enrollment**

**Kindergarten thru 6<sup>th</sup> Grade**

**Ten (10) Week Activity Program – COST CHART**

No of Children	3 to 5 Days Per Week
1 Child	\$106.02
2 Children	\$163.86
3 Children	\$232.80

**PLEASE NOTE: All Payments are accepted on a weekly basis only and should be paid on Monday of each week. Children will not be permitted to class if not paid on due date. Parents are responsible for weekly payments with no discount. Each week must be paid up prior to the week returning. All ten weeks are payable, absent or present. 1 week vacation only if attended ZTCA 2015-2016 School Year.**

**Age 3 thru Preschool Graduate**

**Ten (10) Week Activity Program – COST CHART**

**Preschool (No Adjustment Rate with Family Members)**

Children who are 2 years of age and will be age 3 by September 30, 2016 are accepted in this program.  
Children who are 3 years of age and will be age 4 by September 30, 2016 are accepted in this program.

No of Children	3 to 5 Days Per Week
1	\$116.40

**TEN WEEK PAYMENT DATES**

**MAY 31, 2016**

**JUNE 06, 2016**

**JUNE 13, 2016**

**JUNE 20, 2016**

**JUNE 27, 2016**

**JULY 05, 2016**

**JULY 11, 2016**

**JULY 18, 2016**

**JULY 25, 2016**

**AUGUST 01, 2016**

**THERE WILL BE A \$37.00 CHARGE FOR ALL RETURNED CHECKS.  
PAYMENTS MUST BE SETTLED BEFORE THE NEXT WEEKLY PAYMENT IS DUE.**

**SUMMER ACTIVITY PROGRAM - 2016**  
**SINGLE FEE CHART & NOTES**  
**COST SHEET**

Non-refundable registration fee:

\$51.00 - Age 3 thru Preschool

\$51.00 - Kindergarten graduate thru Age 11

Ten (10) Week Program / **Weekly Payment Schedule** (example: One child payment schedule)

	<i>Kindergarten Graduate thru Age 11</i>	<i>Age 3 - Preschool (Have not completed Kindergarten)</i>
<b>Payment Dates</b>		
May 31, 2016	\$106.02	\$116.40
June 06, 2016	\$106.02	\$116.40
June 13, 2016	\$106.02	\$116.40
June 20, 2016	\$106.02	\$116.40
June 27, 2016	\$106.02	\$116.40
July 05, 2016	\$106.02	\$116.40
July 11, 2016	\$106.02	\$116.40
July 18, 2016	\$106.02	\$116.40
July 25, 2016	\$106.02	\$116.40
August 01, 2016	\$106.02	\$116.40

The overall total cost of the 10 week program is \$1,164.00 for Preschool and \$1,060.20 for K-5 graduate or older. There will be no 4th of July Holiday reduction. When after two days, and payment is not made, (with or without word from parent), your child will not be permitted entrance into the Summer Program.

**Late Fees:**

(1) A charge of \$8.20 beginning with the 1 minute late within each 5 minute segment after 6:00 p.m. on the first occasion. (2) On the second occasion the same cost as the 1<sup>st</sup> late charge with a note stating that the 3<sup>rd</sup> late charge will be \$25.00 per minute late within each 5 minute segment. Dismissal is at 6:00 pm. Parents are expected to pickup your child(ren) on time.

**Payments:**

Payments that are made for the Summer Activity Program are not to be confused with payments to Zion Temple Christian Academy. Please separate these payments.

Please plan to make prompt and timely payments if your child(ren) will be attending either the Summer Activity Program or Zion Temple Christian Academy. Due to the preparation and availability of facilities and attendants, a two-day absence in any given week will not merit a deduction in cost. **Only one (1) week of vacation may be deducted per summer if attended ZTCA 2015-2016 School Year.**

**Last day of the summer program will be Friday, August 05, 2016.**

**Keep this Cost Sheet for your information.**