



AFTERSCHOOL STUDENT ENROLLMENT FORM 2019-20

To be submitted prior to the first day of activities

My child is registered at _____ school in grade _____.
School contact name is _____ and number is _____.

Student Details

Surname _____ First names _____
Date of Birth (month/day/year) _____ Nationality _____
First Language _____ Other Languages _____
Number of siblings _____ Passport Number _____

Parent Details

Father's name (Surname/First names) _____ Mother's (Surname/First names) _____
Employer's Name _____ Employer's Name _____
Position _____ Position _____
Work Tel # _____ Work Tel # _____
Home Tel # _____ Home Tel # _____
Passport Number _____ Passport Number _____
 Married Divorced Separated Single
Name of parent/guardian with custody of child (Attach court order) _____
Email addresses for all school correspondence (At least one) _____
WhatsApp Telephone numbers to add to FLA Family Group _____
Home address with reference _____

Alternative/Emergency Contact(s)

In the event that the school is unable to contact you in an emergency, please provide alternative contacts.

Contact name _____ Contact name _____
Tel Number _____ Tel Number _____
Relationship _____ Relationship _____

Learning disabilities

Does your child have any specific learning difficulties, conditions or educational needs? (eg. Dyslexia, ADHD, ODD, OCD)

No Yes

If yes, please provide additional information and attach the reports.

Medical Information

Family History, known allergies, previous illnesses, physical or learning difficulties, including any relevant information on past or present medical treatment including therapy, occupational or psychological should be attached hereto.

How did you hear about F.L.A? Friends/Family Website Advertisement Other _____

MY PAYMENT CONTRACT

PAYMENTS DUE PRIOR TO CHILD'S ENTRANCE- Circle your selected options based on availability on the timetable.

PRESCHOOL MANDATORY ACTIVITY UNIFORM OPTIONS (Ages 2-5)

Snack <input type="checkbox"/>	Swim Suit <input type="checkbox"/> (Includes 1 swimming suit + 1 goggle)	Karate Kimono <input type="checkbox"/> (Includes 1 top, 1 pants, & 1 belt)	P.E. <input type="checkbox"/> (Includes, 2 tops and 2 bottoms) *Dance/Soccer	Art Apron <input type="checkbox"/> (1 piece)	Sub Total for uniforms &/or snacks	1 st Payment + \$100/hour per month	Monthly Payment Due
\$60	\$40	\$50	\$75	\$15	\$	\$	\$

PRIMARY MANDATORY ACTIVITY UNIFORM OPTIONS (Ages 6-12)

Snack <input type="checkbox"/>	Karate Kimono <input type="checkbox"/> (Includes 1 top, 1 pant, & 1 belt)	Swim Suit <input type="checkbox"/> (Includes 1 swimming suit + 1 goggle)	P.E. <input type="checkbox"/> (Includes, 2 tops and 2 bottoms)	Art Apron <input type="checkbox"/> (1 piece)	Sub Total for uniforms &/or snacks	1 st Payment + \$100/hour per month	Monthly Payment Due
\$70	\$60	\$50	\$75	\$15	\$		

1st Payments= Snacks + Uniforms + Fees = \$ _____

Monthly Payments = Snacks + \$100/hour per month = \$ _____

All Payments are due the first 5 days of each month.

I understand that all fees paid are Non-Refundable. All payments must be made directly to the office in cash or deposited directly into FLA's bank account. Post-dated cheques will not be accepted. It is the parents' responsibility to always obtain a receipt upon payments, whether it is from the office or the bank. The responsibility will be that of the parents, in case a proof of payment should ever be requested from FLA.

PROCREDIT BANK: **Future Leaders Academy** ACCOUNT #: **000 180000 50144 5521 20046** SWIFT CODE: **PRCBCDKI**

I understand that if I decide to change my payment option to another option, after my signed Payment Contract, penalty fees will be applicable. I also understand that If payments are not received within the first 5 academic days, penalty fees of 10% will apply the first week, and increase over the course of the month. I understand that the 1st Payments must be paid in full to Future Leaders Academy, prior to the first day of my child attending. I understand that if payments are not received within 30 days, F.L.A has the right to automatically withdraw my child from his/her activities.

Agreement

I _____, understand that in order to complete my child's registration with F.L.A,
(Parent's surname, first name)

photocopies of the following updated documents must be submitted and attached to the enrollment Form.

Birth Certificate

Updated Health/Vaccination Card

I have also read and understood the Parent Application Booklet 2019-20 in its entirety, and agree to abide by F.L. A's Rules & Regulations and Academic Calendar. I hereby declare that all of the information given is true and accurate to the best of my knowledge. I have understood that in order for my child to participate in F.L.A.'s Afterschool program my payments will need to be submitted, as described, within the allotted times.

Parent Name

Date

Parent Signature