



HOME SCHOOL APPLICATION FOR ENROLLMENT

School Year _____ - _____

New Student Returning Student

Date Starting (if after the first day of school) ____ / ____ / ____

STUDENT INFORMATION

_____ Last Name _____ First Name _____ MI _____ Name Student Prefers _____

Male Female Date of Birth ____ / ____ / ____ Grade Entering _____

Ethnicity:* African American Arabic Asian Caucasian Hispanic Indian Decline to identify
**Pursuant to the Internal Revenue Service (IRS) regulations, Fairfax Baptist Temple Academy is required to file an Annual Certification of Racial Nondiscrimination (Form 5578). Identification is requested but not required.*

School currently attending: _____

City/State/Phone #: _____

Previously attended school(s): *(Names and Addresses)*

_____ School Name _____ City/State _____ Grade _____ Year _____

_____ School Name _____ City/State _____ Grade _____ Year _____

_____ School Name _____ City/State _____ Grade _____ Year _____

Was your child dismissed from any school for academic or behavioral issues? _____

RELIGIOUS STATEMENT

Fairfax Baptist Temple Academy believes and teaches that salvation (being born again) is a personal decision. Salvation comes from a person believing and accepting by faith the death, burial, and resurrection of Jesus Christ and confessing/repenting to God of sin. Baptism by immersion is an act of personal obedience and identification with Christ after salvation.

On the basis of the above definition, do you believe that the student is born again?

Yes No Not sure

PARENT/GUARDIAN INFORMATION

Parent One Father Mother Other _____
(Please Specify)

Last Name First Name MI

Street Address City State Zip Code

Home Phone Cell Phone Work Phone E-mail address

Parent Two Father Mother Other _____
(Please Specify)

Last Name First Name MI

Street Address* City* State* Zip Code*

Home Phone* Cell Phone Work Phone E-mail address*

*Only necessary to complete if different from Parent One.

AGREEMENT

_____ I give consent for my child(ren)'s name(s) or pictures(s) to appear in school publications, including our academy yearbook, newspaper, webpage, or social media. Student names are not used on the webpage or social media.

COURSE PARTICIPATION

Indicate the courses in which the student chooses to participate:

Core Academic Courses: _____ _____

Elective Courses: Physical education Choir Orchestra _____ _____

ATHLETIC PARTICIPATION

Athletic Participation (*FBT Members only*):

Indicate the athletic activities in which the student chooses to participate:

Soccer Volleyball Basketball Cheerleading

FINANCIAL INFORMATION

****Please indicate who is responsible for all financial obligations to FBTA:**

_____	_____	_____	_____
Title	First Name	Last Name	Relationship
_____		_____	_____
Mailing Address		City	State Zip Code
_____	_____	_____	
Home Phone	Cell Phone	Alternate Phone	

Are there any outstanding financial obligations for this student at any other private or church school?

No Yes If yes, please indicate name and address of school: _____

Tuition and supply fees may be divided into two consecutive monthly payments following the completion of the Home School Application for Enrollment. Payments are due on the 5th day of the month. A late fee is applied to all delinquent accounts on the 15th. Fees are not adjusted for irregular classes or attendance.

Parent/Guardian's Signature

****NON-REFUNDABLE REGISTRATION FEE MUST ACCOMPANY APPLICATION FORM**

OFFICE USE

Reg. Date _____ Ck# _____ Cash Rec. # _____ \$ _____ AO _____ FO _____