



# ENROLLMENT APPLICATION

Date: \_\_\_\_\_ Email: \_\_\_\_\_

Child's Name: \_\_\_\_\_  Male  Female

Child's Age: \_\_\_\_\_ Birth Date: \_\_\_\_\_ Grade for 2020-2021 school year: \_\_\_\_\_

Parent's Name: \_\_\_\_\_

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

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

Telephone: (home) \_\_\_\_\_ (cell) \_\_\_\_\_ (work) \_\_\_\_\_

Academic Day Only  Academic Day plus Extended Day Care

Does your child presently attend Action Day or Primary Plus?  Yes  No If yes, which location: \_\_\_\_\_

**New student fees:** (non-refundable)

- Registration Fee: \$150.00
- Enrollment Fee: \$300.00\*
- Books, Materials, and Technology Fee: \$350.00

**Continuing student fees:** (non-refundable)

- Enrollment Fee: \$300.00\*
- Books, Materials, and Technology Fee: \$350.00

Attach your non-refundable enrollment fee and sign below.

Payments received by credit or debit card will be subject to 2.75% convenience fee.

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

\*\$200 if received by 12/31.

OFFICE USE ONLY	
Payment Type: _____	Smartcare: _____
Amount Paid: _____	Fax: _____
Date: _____	List: _____
Received by: _____	To Corp: _____
Location: _____	Board: _____