



Fearfully & Wonderfully Made Academy Student Enrollment Application

Date of Application: _____

Please share some information about the student.

Name: _____ Grade: _____

Birthday: _____ Age: _____

Home Address: _____

E-mail Address: _____ Phone number: _____

Does your child have any allergies? If so, please explain.

Will your child need to take any medications during the school day? If so, please explain.

Does your child have any known learning struggles or other diagnoses that affect his or her ability to learn successfully? If yes, please explain.

*Also if yes, would you be willing to meet before school begins to create an Individualized Plan of Education for your child to ensure he or she receives the instructional methods that allow him or her to learn successfully? _____

Please share some information about the parents and/or guardians.

Parent/Guardian 1:

Name: _____ Relationship to student: _____

Home Address: _____

E-mail Address: _____ Phone number: _____

Employer: _____ Work Phone number: _____

Parent/Guardian 2:

Name: _____ Relationship to student: _____

Home Address: _____

E-mail Address: _____ Phone number: _____

Employer: _____ Work Phone number: _____

Other Authorized Adult:

Name: _____ Relationship to student: _____

Home Address: _____

E-mail Address: _____ Phone number: _____

Employer: _____ Work Phone number: _____

Please share more details regarding your child's registration.

In which program are you enrolling your child(ren)?

Full-time student (Monday-Friday 9:00-2:00)

Half-time Student (Monday-Friday 9:00-11:55)

Part-time Student (Only specific classes Monday-Thursday)

*If part time, please select which classes you would like your child to attend.

Lower Elementary: Math 10:00-10:55 ELA 11:00-11:55 Gather 'Round 1:00-1:55

Upper Elementary: ELA 10:00-10:55 Math 11:00-11:55 Gather 'Round 1:00-1:55

Middle School: ELA 10:00-10:55 Math 11:00-11:55 Gather 'Round 1:00-1:55

Please select a payment option.

Pay for the year in full by August 15, 2023 for a 10% discount.

Pay on the 15th of each month (August-May) beginning August 15, 2023.

To what email should the invoices be sent? _____

Please read the following statements and initial each one. Initiaing these statements shows that you are in agreement with our procedures and policies.

I agree to drop off and pick up my child/teen on time each day to avoid disrupting the schedules of other sessions. (no more than 5 minutes before drop off and no more than 5 minutes after pick up)

I agree to abide by the selected payment plan and to pay on time each month as stated in the previous section of this form.

I give my child permission to walk to and from the park with designated adults from Fearfully & Wonderfully Made.

I understand that for the safety of my child/teen and the other children/teens in attendance, I will not be allowed to enter the classroom area. When dropping off and picking up, I will wait in the lobby.

In the very unlikely event of an accident or injury, I understand that Fearfully & Wonderfully Made will not be held liable for any incidents that may occur.

Please only initial the option that is appropriate for your family.

I give my permission for Fearfully & Wonderfully Made to utilize pictures of my child on the organization's Facebook page, website, and marketing materials.

I do not want my child's picture to be posted on any social media, websites, or marketing materials. If a group picture is posted, my child's face needs to be covered.

Parent Signature

Date