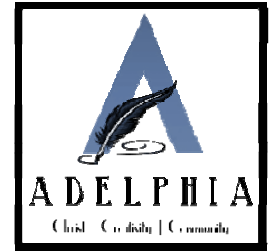


ADELPHIA CLASSICAL CHRISTIAN ACADEMY

Part-Time High School Registration 2018 -2019



Father's/Guardian Name _____

Mother's/Guardian Name _____

Street Address _____

City / Zip _____

Telephone () _____ Alternate () _____

E-mail Address _____

Student(s) re-enrolling	Birth Date	Sex	Entering Grade Level
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Registration is \$150 per student before June 1st and \$225 after that time and must accompany this registration. Registration fees are non-refundable.

Make checks payable to Adelphia Classical Christian Schools and give to Office Manager or mail to: Adelphia, Re: Registration

710 S. Cambridge St., Orange, CA 92866

For Official Use Only

Completed Re-Registration Form	<input type="checkbox"/>	Received	<input type="checkbox"/>
Acknowledgements	<input type="checkbox"/>	Decision	<input type="checkbox"/>
Financial Agreement	<input type="checkbox"/>	<i>Reason for Denial</i>	
Medical Information	<input type="checkbox"/>	<input type="checkbox"/>	
Emergency Contact	<input type="checkbox"/>	<input type="checkbox"/>	
Re-Registration Fees	<input type="checkbox"/>	Notified	<input type="checkbox"/>

ACKNOWLEDGEMENTS

Please initial on the lines below indicating you have read and acknowledge each one.

SCHOOL DIRECTORY

_____ I/we understand that my/our contact information will be published in the school directory. No other part of this information is used for solicitation or other purposed contrary to the intent of the directory.

USE OF PICTURES

_____ I/we understand that pictures can and will be taken of my child(ren) in school settings or field trips that can be included in any school material (yearbooks), Adelphia webpage, social media, and marketing materials. No pictures will be used contrary to the intent of school policy. Names will not be used or tagged on the Adelphia webpage, social media or marketing materials.

REGISTRATION ACKNOWLEDGMENT

Please initial on the lines below indicating you have read and acknowledge each one.

_____ I/we understand that by signing this registration commitment, the school incurs financial obligations for faculty, staff, facilities, and supplies. Upon withdrawal, for any reason, on or after June 1st, 2018, I/we agree to abide by the conditions of the Adelphia Financial Policy (included in this packet).

_____ I/we understand that a part-time student is defined as a student not enrolled in Adelphia's full-time program, and as such, Adelphia does not hold any records (CUM Files, Transcripts, etc) or file an affidavit on behalf of part-time enrolled students.

_____ I/we understand that part-time students will electronically receive (via email from Adelphia) a report card with their grades at the end of the semester and end of the year.

_____ I/we understand that a class will be cancelled and tuition refunded if less than 6 students sign up. Registration will be refunded if only enrolled in the one cancelled class.

_____ I/we understand that parents are not allowed on campus unless volunteering or for a meeting (you are welcome to hang out in the front parking lot, go to the park or a nearby coffee shop to pass the time. We thank you in advance for your cooperation regarding this).

_____ I/we agree and commit to our student participating in the enrolled class(s) fully - doing all homework, projects, tests, quizzes and classwork required – and that not doing so may result in academic suspension if student's grade falls below a C- and will not be refunded for the class.

_____ I/we agree to the terms and conditions of this registration commitment as well as the rules and regulations of Adelphia Classical Christian Academy that are included in the Registration Packets and the 2018-2019 Adelphia's Part-Time Student School Handbook. Execution of this registration does not imply promotion from the student's current grade.

Date

(Father/guardian) Sign

Print Name

(Mother/guardian) Sign

Print Name

You may sign up for up to three of the following classes which will be offered in the 2018-2019 school year. Spaces for classes are limited. Some classes may require a material fee to be collect the first day of class.

Please initial on the lines below indicating you have read and acknowledge each item.

_____ I/we understand that if student takes multiple classes which have any time (besides lunch) between classes and are planning on staying on campus, they are required to be in study hall. For safety and distraction reasons, this is mandatory. Study hall is quiet time to do homework. **The cost of study hall is \$2/hr**; however, you are welcome to take your student off campus between classes. Hart Park is next door and there are several coffee shops close by.

Adelphia has a tract of high school classes we offer each year which rotates, therefore not all classes are offered every year. We may be able to add classes if there is enough interest.

Most of following classes will be offered in 2019-2020. If Adelphia offered any of the following classes this coming year, I would be very interested in signing up for them:

- | | |
|--|--|
| <input type="checkbox"/> World History | <input type="checkbox"/> Public Speaking |
| <input type="checkbox"/> Geometry | <input type="checkbox"/> Home Economics / Health |
| <input type="checkbox"/> Physics | <input type="checkbox"/> Geography |
| <input type="checkbox"/> Biology | <input type="checkbox"/> Spanish I |
| <input type="checkbox"/> Formal Logic | <input type="checkbox"/> French I |

SINGLE SUBJECT REGISTRATION

High School Class Schedule

Time	Monday	Tuesday	Thursday
8:30 - 9:30	<input type="checkbox"/> Lit & Comp I & II \$850 <input type="checkbox"/> Chemistry \$850 <input type="checkbox"/> Study Hall \$62	<i>Lit & Comp I & II</i> <i>Chemistry</i> <input type="checkbox"/> Study Hall \$62	<i>Lit & Comp I & II</i> <i>Chemistry</i> <input type="checkbox"/> Study Hall \$62
9:30 - 10:25	<input type="checkbox"/> Pre-Algebra \$850 <input type="checkbox"/> Algebra I \$850 <input type="checkbox"/> Algebra II \$850 <input type="checkbox"/> Pre-Calculus \$850 <input type="checkbox"/> Study Hall \$62	<i>Pre-Algebra</i> <i>Algebra I</i> <i>Algebra II</i> <i>Pre-Calculus</i> <input type="checkbox"/> Study Hall \$62	<i>Pre-Algebra</i> <i>Algebra I</i> <i>Algebra II</i> <i>Pre-Calculus</i> <input type="checkbox"/> Study Hall \$62
10:25 - 11:25	<input type="checkbox"/> Latin I \$850 <input type="checkbox"/> Latin II \$850 <input type="checkbox"/> Study Hall \$62	<i>Pre-Algebra</i> <i>Algebra I</i> <i>Algebra II</i> <i>Pre-Calculus</i> <input type="checkbox"/> Study Hall \$62	<i>Latin I</i> <i>Latin II</i> <input type="checkbox"/> Study Hall \$62
11:25 - 12:15	Lunch / Break		
12:15 - 1:10		<i>Latin I</i> <i>Latin II</i> <input type="checkbox"/> Study Hall \$62	<input type="checkbox"/> SAT/CHSPE Study Skills \$450 <input type="checkbox"/> Study Hall \$62
1:10 - 2:05		<input type="checkbox"/> US History \$850 <input type="checkbox"/> Gov \$450 / Econ \$450 <input type="checkbox"/> Study Hall \$62	<i>US History</i> <i>Government / Economics</i> <input type="checkbox"/> Study Hall \$62
2:05 - 3:00		<input type="checkbox"/> Lit & Comp III & IV \$850 <input type="checkbox"/> Physical Science \$850 <input type="checkbox"/> Study Hall \$62	<i>Lit & Comp III & IV</i> <i>Physical Science</i> <input type="checkbox"/> Study Hall \$62

2018-2019 SINGLE CLASS HIGH SCHOOL REGISTRATION FORM

Student #1 Name _____

Student #2 Name _____

Grade _____	Units	Tuition	Total
<input type="checkbox"/> Lit & Comp I & II	10	\$850	
<input type="checkbox"/> Lit & Comp III & IV	10	\$850	
<input type="checkbox"/> Chemistry	10	\$850	
<input type="checkbox"/> Pre-Algebra	10	\$850	
<input type="checkbox"/> Algebra I	10	\$850	
<input type="checkbox"/> Algebra II	10	\$850	
<input type="checkbox"/> Pre-Calculus	10	\$850	
<input type="checkbox"/> Latin I	10	\$850	
<input type="checkbox"/> Latin II	10	\$850	
<input type="checkbox"/> US History	10	\$850	
<input type="checkbox"/> Government (1 st Sem)	5	\$425	
<input type="checkbox"/> Economics (2 nd Sem)	5	\$425	
<input type="checkbox"/> SAT/CHSPE Study Skills	5	\$425	
<input type="checkbox"/> Study Hall		\$62	
STUDENT #1 TUITION TOTAL			

\$62 x the # of study halls

Grade _____	Units	Tuition	Total
<input type="checkbox"/> Lit & Comp I & II	10	\$850	
<input type="checkbox"/> Lit & Comp III & IV	10	\$850	
<input type="checkbox"/> Chemistry	10	\$850	
<input type="checkbox"/> Pre-Algebra	10	\$850	
<input type="checkbox"/> Algebra I	10	\$850	
<input type="checkbox"/> Algebra II	10	\$850	
<input type="checkbox"/> Pre-Calculus	10	\$850	
<input type="checkbox"/> Latin I	10	\$850	
<input type="checkbox"/> Latin II	10	\$850	
<input type="checkbox"/> US History	10	\$850	
<input type="checkbox"/> Government (1 st Sem)	5	\$425	
<input type="checkbox"/> Economics (2 nd Sem)	5	\$425	
<input type="checkbox"/> SAT/CHSPE Study Skills	5	\$425	
<input type="checkbox"/> Study Hall		\$62	
STUDENT #2 TUITION TOTAL			

\$62 x the # of study halls

Student #3 Name _____

Student #4 Name _____

Grade _____	Units	Tuition	Total
<input type="checkbox"/> Lit & Comp I & II	10	\$850	
<input type="checkbox"/> Lit & Comp III & IV	10	\$850	
<input type="checkbox"/> Chemistry	10	\$850	
<input type="checkbox"/> Pre-Algebra	10	\$850	
<input type="checkbox"/> Algebra I	10	\$850	
<input type="checkbox"/> Algebra II	10	\$850	
<input type="checkbox"/> Pre-Calculus	10	\$850	
<input type="checkbox"/> Latin I	10	\$850	
<input type="checkbox"/> Latin II	10	\$850	
<input type="checkbox"/> US History	10	\$850	
<input type="checkbox"/> Government (1 st Sem)	5	\$425	
<input type="checkbox"/> Economics (2 nd Sem)	5	\$425	
<input type="checkbox"/> SAT/CHSPE Study Skills	5	\$425	
<input type="checkbox"/> Study Hall		\$62	
STUDENT #3 TUITION TOTAL			

\$62 x the # of study halls

Grade _____	Units	Tuition	Total
<input type="checkbox"/> Lit & Comp I & II	10	\$850	
<input type="checkbox"/> Lit & Comp III & IV	10	\$850	
<input type="checkbox"/> Chemistry	10	\$850	
<input type="checkbox"/> Pre-Algebra	10	\$850	
<input type="checkbox"/> Algebra I	10	\$850	
<input type="checkbox"/> Algebra II	10	\$850	
<input type="checkbox"/> Pre-Calculus	10	\$850	
<input type="checkbox"/> Latin I	10	\$850	
<input type="checkbox"/> Latin II	10	\$850	
<input type="checkbox"/> US History	10	\$850	
<input type="checkbox"/> Government (1 st Sem)	5	\$425	
<input type="checkbox"/> Economics (2 nd Sem)	5	\$425	
<input type="checkbox"/> SAT/CHSPE Study Skills	5	\$425	
<input type="checkbox"/> Study Hall		\$62	
STUDENT #4 TUITION TOTAL			

\$62 x the # of study halls

Registration (\$150 per student before June 1st and \$225 after that time):

#1 reg _____ + #2 reg _____ + #3 reg _____ + #4 reg _____ = _____ Total Registration

#1 tuition _____ + #2 tuition _____ + #3 tuition _____ + #4 tuition _____ = _____ Total Tuition

Registration must be included with this application. First payment for Tuition due June 1st, 2018.

2018– 2019 Part Time High School Student Financial Agreement



We commit to the following tuition payment plan for the 2018-2019 Adelphia Classical Christian Academy school year. Please initial below to indicate you have read each line.

\$425 for a 5 unit class, \$850 for a 10 unit class

Tuition Payment Plan. Select One Option:

- a) Payment in Full (due **June 1st**);
- b) (3) Payments (**June 1st**, Aug 1st, October 1st);
- c) (5) Payments (**June 1st**, July 1st, Aug 1st, Sept 1st, Oct 1st).

Tuition is late if not received on or before the 1st of the month it is due. Late payments will incur a \$30 Late Fee. All payments shall be payable to Adelphia Classical Christian Academy.

**** THE FINANCIALLY RESPONSIBLE GUARDIAN(S) MUST READ AND INITIAL EACH PARAGRAPH:**

_____ **No Refund of Registration Fee:** \$150 per student before June 1st and \$225 after that time and is considered a commitment to enroll in Adelphia. Payment shall accompany the completed registration. This fee is not refundable unless the school declines to accept a student or there is no space in the grade.

_____ **Curriculum.** Adelphia Classical Christian School (Adelphia) will establish the curriculum for each class, but parents are responsible for purchasing their student's materials. By signing below parents acknowledge they are financially responsible for purchasing the Adelphia assigned text books and teacher guides prior to the start of classes.

_____ **Withdrawal of Student.** Unless written notice is given before June 1st, any withdrawal of a student between June 1, 2018 and the start of school will incur a charge of 25% of the tuition per student. After the start of school parents are committed to pay the remaining full tuition balance up through the end of the school year.

_____ **Past Due Accounts:** Accounts that are more than 30-days past due may result in the suspension of a student's right to attend classes. Accounts must be current before families receive report cards and have online access to of school information. Past due accounts may be sent to collections.

_____ **Returned Checks and Late Fees.** A \$30 late fee will be charged for returned checks and amounts past due.

By signing below I/we affirm each of the statements contained in this paragraph. I/we affirm that all of the statements and information I/we have provided in this document are true and correct. I/we affirm that I/we have read and understand the financial policies of Adelphia in this document. I/we agree to pay tuition to Adelphia in accordance with the above selected plan. I/we agree to pay all other Adelphia fees as they are incurred and charged. I/we agree to pay all collection costs, interest, and costs related to the enforcement of this contract. I/we agree to be financially responsible for the payment of tuition and fees for the abovementioned student(s).

Date

(Father/guardian) Sign

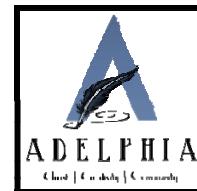
Print Name

(Mother/guardian) Sign

Print Name

ADELPHIA CLASSICAL CHRISTIAN ACADEMY

STUDENT MEDICAL INFORMATION



****Please print and fill out as many copies as you need for each student you are enrolling.**

Student's name: _____

Date of last tetanus shot: _____

Wears glasses/contacts: All the time: () For reading: () Other: _____

Any hearing loss? Yes () No () If "yes" please explain: _____

Does the student have any special recommendations/restrictions by a physician concerning school? Yes () No () If "yes" please list: _____

Does the student have any special medication requirements? Yes () No () If "yes" please explain: _____

Is the student allergic to any medications? Yes () No () If "yes" please list: _____

Does the student have any allergies? Yes () No () If "yes" please list: _____

Has the student had any recent illnesses, surgeries, or hospitalizations? Yes () No () If "yes" please explain: _____

Has the student been diagnosed either currently or previously with any medical or mental conditions? Yes () No () If "yes" please list which condition, year it was diagnosed, and medications, if any, currently taking: _____

Does the student have any noted behavior problems? Yes () No () If "yes" please explain: _____

Does the student have any learning disabilities? Yes () No ()

Have this/these learning disabilities been diagnosed by a professional? Yes () No ()

If "yes" to the either question, please list the learning disability, when it was diagnosed, and what, if any, treatment/help has been sought to correct or overcome, accommodations you would be seeking, and medications are taken: _____

Does the student require any other accommodations to their educational development and learning or their learning environment? Yes () No () If "yes" please explain _____

Please initial in agreement: _____ I/we have answered this completely and to the best of our knowledge. I/we understand if information is withheld which effects the learning environment, we may forfeit our enrollment at the school and will still be financially responsible for all fees and tuition as outlined in the financial agreement.

Date

(Father/guardian) Sign

(Mother/guardian) Sign

Print Name

Print Name

