



2023-2024 Elementary Registration Form

Elementary Registration Fee: \$600

Paid in full ___ Partial Pay ___
check ___ cash ___ draft ___

www.avillachristian.org

501-408-4631

Student Information:

Child's Full Name: _____ Grade entering: _____
Birth Date: _____ Current Age: _____ Gender: ___ Male ___ Female
Street Address: _____
City: _____, AR Zip: _____

Does your child have a physical or emotional health issue of which the school should be aware? This may include special diets, prescriptions, allergies, counseling, or limitations on normal activities? Yes ___ No ___

Please explain: _____

Parent/Primary Guardian Information:

Primary Guardian Name(s): _____
Father's Name: _____ Mother's Name: _____
Cell Ph#: _____ Cell Ph#: _____
Work Ph#: _____ Work Ph#: _____
Email: _____ Email: _____

Student lives with (check all that apply):

___ Father ___ Mother ___ Stepfather ___ Stepmother ___ Other: _____

Parents are: ___ Married ___ Divorced ___ Separated ___ Father deceased ___ Mother deceased

If divorced, special arrangements: _____

Custodial agreement: It is the policy of Avilla Christian Academy to afford custodial and non-custodial parents the same access to their children and the same rights and responsibilities toward their children as long as it does not violate any court approved decree. The non-custodial parent is given access to any and all information with regard to his/her child's attendance and participation in Avilla Christian Academy as long as it does not violate any court approved decree. It is also the policy to allow the non-custodial parent free access to his/her child during the school day for activities, lunch, and transportation to and from school as long as it does not violate any court approved decree. Any other arrangements need to be provided to the Principal, in writing with either a court order or an agreement signed between both parents.

Sibling's Names: Age: Grade: School Attending:

Mass communication: ACA will occasionally communicate information and updates through mass email and/or text message. I would like the following to be added to this list:

Email: _____ Cell Ph#: _____
Email: _____ Cell Ph#: _____

Family Church Membership:

Church: _____ Pastor: _____
Is student baptized? ___ Yes ___ No Enrolled in Sunday school? ___ Yes ___ No

Our Mission Statement: To make disciples of Jesus Christ who will be equipped spiritually, socially, and academically to further God's kingdom in this world.