



24112411

CenterPoint Christian Academy

1225 S. Center Road

Burton, MI 48509

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REGISTRATION 2024-2025

- New Families - Please complete the entire form**
(Completing this form does not guarantee admission to the school).
- Returning Families - Please complete sections I, III, and IV**
(Only if there have been any changes in the last year)

Grade Entering _____

Student Name _____ Sex _____ Age _____
Last First Middle

I. INFORMATION CONCERNING THE STUDENT: (please print)

Home Address _____ City _____ Zip _____

Telephone (____) _____ City/State of Birth _____

Date of Birth _____ School District you reside in _____

II. NEW STUDENT INFORMATION

Last School Attended _____

Address _____
Street City Zip

Has the student repeated any grade? _____ if so, state briefly why. _____

Student's grades have been ___ Superior ___ Above Average ___ Average ___ Below Average

Has the student had any disciplinary issues in school (fighting, suspended, expelled, etc.)? _____ if yes, please explain:

Has the student ever been arrested? _____ if yes, please explain: _____

Has this student used any drugs, alcohol, or tobacco? _____ if yes, please explain: _____

Does this student have a current IEP, 504 plan or receive any intervention services? Yes No

Does this child have any learning difficulties or physical limitations that might require special professional assistance? Yes No

If yes, we will need a copy of all documentation. If yes, please explain: _____

Did anyone recommend this school to you? Yes No If Yes, whom? _____

Why are you interested in sending your child (ren) here? _____

How did you hear about CenterPoint Christian Academy? _____

Has this student made a profession of faith in Christ? Yes No

III. INFORMATION CONCERNING THE FAMILY (New and Returning Students)

Father/Guardian Does the student live with the father? ____ Does the father receive school mailings? ____

Name _____ Address _____

City _____ Zip Code _____ Occupation _____

Employer _____ Employer's address _____

Work Phone () _____ Cell Phone () _____ Home Phone _____

Email Address: _____ Married _____ Sep. _____ Divorced _____

Church attended _____ Phone # _____

Pastor _____ is the father a Christian? Yes No

Mother/Guardian Does the student live with the mother? ____ Does the mother receive school mailings? ____

Name _____ Address _____

City _____ Zip Code _____ Occupation _____

Employer _____ Employer's address _____

Work Phone () _____ Cell Phone () _____ Home Phone _____

Email Address: _____ Married _____ Sep. _____ Divorced _____

Church attended _____ Phone # _____

Pastor _____ is the mother a Christian? Yes No

List the names, grades, and school of siblings:

Name _____ Grade _____ School _____

Name _____ Grade _____ School _____

Name _____ Grade _____ School _____

Name _____ Grade _____ School _____

Statement of Cooperation

(Please read carefully before signing)

1. I hereby agree to accept all regulations as outlined in the Student Handbook of CenterPoint Christian Academy on behalf of the applicant.
2. I understand that one parent is required to attend the back-to-school orientation meeting before my child(ren) attends CenterPoint Christian Academy.
3. I understand that all paperwork, registration fees, emergency card, etc. must be completed and on file in the school office *before* my child can attend the first day of school.
4. I understand that all outstanding financial obligations must be paid to CCA in order for my child (ren) to be officially enrolled at CCA. (I.e. past tuition, childcare, lunch balances, sports fees, book fees, etc.)
5. I hereby pledge to pay my financial obligations to CCA and understand that all families select a payment plan option as stated on the Financial Contract. I understand these are the requirements I must follow for the option plan I select:
 - If I select **Option 1**, I must pay, 100% of the tuition on or before the due date in the school office. If my payment is not made within five days past the due date, I will enroll in the FACTS payment plan.
 - If I select **Option 2**, the two-payment plan, I understand 50% of my total payment must be paid on or before the due dates. If I do not meet the due dates, I must enroll in the FACTS payment plan.
 - If I select **Option 3** or **Option 4**, I accept the responsibility of notifying the school in advance of the possibility of NSF, stop payment, loss of credit card privileges, etc. If my tuition payment is two weeks behind, I understand my child (ren) will be excluded from school until tuition is up-to-date.
 - I have the option to participate in the POM (Peace of Mind) benefit through FACTS. The amount is \$25 per agreement and will cover any FACTS unpaid balance (except payment in arrears) in the event of the death of the Responsible Party who has signed the FACTS agreement or his/her legal spouse. **For more information see the FACTS Agreement.*
6. If I receive scholarship money, I will be required to volunteer 1 hour for every one-hundred dollars awarded each school year (i.e. \$500 scholarship = 5 hours). I also understand that if my child is withdrawn for any reason during the school year, the scholarship will be adjusted on a per-quarter basis.
7. I recognize that tuition covers core expense for CCA. Annual fundraising is required to help enable continued school growth and development. Our primary school fundraiser is the Pizza Throwdown although there are others throughout the school year where volunteer hours are expected. I pledge to support all CCA fundraising efforts by actively participating and/or volunteering to help whenever and wherever I can.
8. I recognize that my participation is needed in prayer, communication, service and gifts in order to properly share in the training of my child (ren). I sincerely pledge my support to the mission and vision of CCA.
9. I agree to uphold and support the high academic standards of CCA by providing a place at home for my child (ren) to study and by giving them encouragement in the completion of homework and assignments. I will communicate with my child's teacher any concerns regarding my child's academic progress and behavior.
10. Sycamore Education and email are CCA's main forms of communication. I agree to use Sycamore Education and read emails from the school to access my student's grades and keep track of upcoming events.
11. I understand the culture of CCA will not tolerate profanity or obscenity in word or action, dishonor to the Holy Trinity and the Word of God, or disrespect to its personnel. This includes using the name of our Lord in vain.
12. It is understood that attendance at CCA is a privilege and not a right. Students must have a desire to be here. Any student who does not adhere to CCA expectations and policies may forfeit this privilege. CCA may request the withdrawal of any student at any time who, in the opinion of CCA, does not abide by the overall goals and objectives of CCA.

13. I hereby agree to authorize CCA to employ such discipline as it deems wise and expedient for my child (ren).
14. As a parent/guardian, I will accept as final authority the decision of the administrator and advisory board. If I am unable to accept the decision, I will voluntarily withdraw my child (ren) from CCA.
15. Tardiness is a disruption to the classroom. I accept responsibility to have my child arrive to school on time (8:15 a.m. – 8:20 a.m.) and attend each school day, unless an emergency arises. I fully understand and agree that excessive tardiness/absenteeism will result in more severe consequences, which may include truancy reporting according to the State of Michigan.
16. I will read the CCA Student Handbook with my child (ren) and we will follow the contents therein.
17. The Bible commands Christians to settle their disputes without governmental intervention, therefore I promise to resolve any disputes involving or affecting the school, its employees or its volunteers privately.
18. I will discuss any problem with the teacher, coach, volunteer, or other personnel, first. I will follow the appropriate steps before commenting to my child (ren), realizing this can cause a conflict in the child (ren)'s mind regarding authority.
19. The appropriate steps to resolve conflict at CCA are the following: student and teacher; student, teacher and parent; student, teacher, parent and principal: student, teacher, parent, principal and senior pastor.
20. The appropriate steps to resolve conflict for athletics: student and coach; student, coach and parent; student, coach, parent and athletic director; student, coach, parent, athletic director and principal; student, coach, athletic director, principal and senior pastor.
21. I/We, the parent(s) of _____ do hereby allow CCA, to photograph the above mentioned child(ren) in or about the school premises and during the course of school activities either on or away from campus; to be used with CCA website, yearbook other publications or circumstances resulting in public viewing of said photograph. I/We expressly waive all rights to compensation and/or royalties, etc. for the use of said photographs.
22. I accept the regulations of CCA, and I authorize the school to hold my child accountable to CenterPoint Christian Academy's standards and policies through the implementation of appropriate school discipline methods with my child. I give consent for my child to be transported and to take part in all school activities, including sports and school-sponsored trips away from the school premises, and absolve the school of liability of injury to my child during school activities. I pledge my cooperation in regular tuition payments, practical service, prayer and special gifts as the Lord enables me. Further, I agree to have my child taught according to the Statement of Belief. I understand that any false information or significant omissions may disqualify my child from admission and may be justification for dismissal from CenterPoint Christian Academy if discovered later.

I/We have read all the terms in this Statement of Cooperation and agree thereto.

Parent/Guardian Signature _____ Date _____

Print Parent/Guardian Name _____

Parent/Guardian Signature _____ Date _____

Print Parent/Guardian Name _____

Student Signature (Grade 6th – 12th) _____ Grade _____

Print Student Name _____