Calvary Chapel Baptist Church
Faith Christian School
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Faith Christian School – Registration and Tuition Schedule: 2026-2027

A. Non-Refundable Registration Fee

Registration for all students preschool and kindergarten is as follows:

1. Before May 1, 2026 (or a new student)	$200.00
2. After May 1, 2026	$250.00

Registration for grades 1-8 is as follows:

1. Before May 1, 2026 (or a new student)	$350.00
2. After May 1, 2026	$400.00

-K4 Students must be 4 years old before October 31, 2026
-K5 Students must be 5 years old before October 31, 2026
-First Grade students must be 6 years old before October 31, 2026
After May 1, 2026 returning students cannot be guaranteed a spot without an active registration on file.

A. Monthly Tuition Rates (Payments begin August 1, 2026 and are due the first of each month with the last payment due by April 1, 2027)

Preschool/K – 2 day program	**Rates**	**9 Payments**
- Half day (8:30 AM-12: 00 PM)	$3,100	$345.00
- Full day (from 8:30AM to 2:00PM)	$4,100	$456.00
Preschool/K – 3 day program		
- Half day (8:30 AM-12: 00 PM)	$4,200	$467.00
- Full day (from 8:30AM to 2:00PM)	$5,600	$623.00
Kindergarten		
-Four full days (8:30 – 2:00)	$6,600	$734.00
-Five half days (8:30 – 12:00)	$5,900	$656.00
-Five full days (8:30-2:00)	$7,600	$845.00
Grades 1-8 (Monday through Friday from 8:30 AM – 2:00 PM)		
- First Child	$8,300	$923.00
- Second Child	$7,300	$812.00
-Third Child	$6,300	$700.00

Notice of nondiscriminatory policy: The Faith Christian School admits students of any race, color, national and ethnic origin to all the rights and privileges, programs, and activities generally accorded or made available to any student at the school. It does not discriminate on the basis of color, race, national and ethnic origin in administration of its education and admission policies, scholarships, loan programs, and athletic and other school administered programs.

Faith Christian School
Financial Policy
2026-2027

1. Payment of the registration fee must accompany your child's registration and will hold your child's place in the class until August 1, 2026.

1. Tuition must be received by August 1, 2026, or the school reserves the right to release your child's spot to a child on our waiting list.

1. If you pay the tuition in full by August 1, 2026, you will receive a 5% discount.

1. Tuition can also be paid in nine monthly payments beginning August 1, 2026 and ending April 1, 2027. There is no fee for the monthly payment plan.

1. Students will not be permitted to attend class when their account is 30 days past due.

1. All checks must be made payable to Faith Christian School. If the bank returns any check to the school, for any reason, you will be responsible for any and all service charges. Thereafter, payments must be made in cash or money order.

1. You must receive a receipt for any cash payments. The school will not be responsible for any cash payments unless you can show a receipt from the school.

Refund Policies

1. Registration fees are non-refundable
2. After August 1, 2026, you are responsible for 10% of the tuition.
3. Refunds will be made according to the following schedule:
   Withdrawal during the first quarter you are responsible for 50% of the tuition
   Withdrawal during the second quarter you are responsible for 75% of the tuition
   Withdrawal after the start of the third quarter you are responsible for 100% of the tuition.
1. A withdrawal becomes effective the day the school receives written notice from the parent.

Academic records for any student will not be released until all financial responsibilities have been satisfied.

I have read the above policy and agree to abide to the policy.

Student's Name_____ Grade _____

Parent's Signature _____

Faith Christian School

Registration: 2026-2027

Date _____ Child's Birthdate _____

Child's Name _____
(Last) (First) (M.I.)

Last School Attended _____ Grade Completed _____

Home Address _____ Phone _____
(street) (city) (zip)

E – mail address _____

Father's Full Name _____ Occupation _____

Mother's Full Name _____ Occupation _____

Father's Work Number _____ Mother's Work Number _____

Cell Phone #'s_____

Marital Status _____

Who is financially responsible for this obligation? _____

Address if different from above _____

What features of Faith Christian appeal to you most? _____

What church are you presently attending? _____

Location _____ Pastor's Name _____

I give permission for the following persons to bring my child home from Faith Christian School at various times. _____

Parent's Signature _____

Date _____

Faith Christian School
Medical Release Form
School Year 2026-2027

Student's Name _____Grade_____

In case the staff of Faith Christian School is unable to contact one of the parents, the undersigned parent gives permission to the staff of Faith Christian School to administer the proper first aid and emergency care.

If the staff deems it necessary to transport my child to the hospital, this document serves as permission to transport my child to the nearest hospital or medical facility.

If for any reason our child is to be taken to a hospital, the below-signed parent gives the staff of Faith Christian School the absolute authority to act in our behalf. If they deem it necessary to take our child to a medical facility of any kind for an injury or illness, we respectfully request that the medical facility do whatever is necessary to help and care for our child in our absences. We also request that we be notified immediately at the telephone numbers listed on this form of any care that is rendered by such facility.

In the event that we cannot be located for a verbal confirmation of any care that is necessary, we regard this written and signed document as a release of all liability, which does not constitute negligence, anyone may incur during a medical emergency or medical illness.

Parent's Signature _____

Date _____

Faith Christian School
Field Trip Authorization
School Year 2026-2027

I give permission for my child to walk in the neighborhood during the school year with the principal, teacher, and teacher aides, and or adults approved by the principal. I further give permission for my child to participate in field trips in a vehicle when necessary in and around the Gloucester/Rockport area. (Any other field trips outside of this area will have their own special permission slips).

Parent's Signature _____

Date _____

Faith Christian School
Picture Authorization
School Year 2026-2027

I give permission for the Faith Christian School to use any photograph or video presentation of my child to use for advertising purposes: such as brochures, websites, newspaper advertisements, Facebook, etc.

Parent's Signature_____

Date_____

Faith Christian School
Financial Worksheet
School Year: 2026-2027

Parent's Name _____ Date _____

Student's Name _____ Grade _____

Student's Name _____ Grade _____

Student's Name _____ Grade _____

Preschool/Kindergarten

Two Half Days $ _____

Two Full Days $ _____

Three Half Days $ _____

Three Full Days $ _____

Kindergarten

4 Full Days $ _____

5 Half Days $_____

5 Full Days $ _____

Grades 1-8

First Child $ _____

Second Child $ _____

Third Child $ _____

*Paid in Full by 8/1/2026
5% Discount $ _____

Total $ _____

9 Monthly Payments (8/1/26-4/1/27) $ _____

I have read and agree to the Financial Policy of Faith Christian School. I agree to pay the above tuition as noted.

Parent's Signature _____ Date _____
*One discount allowed per family.