

Regency Christian Academy 2015-2016 Elementary Registration

Dear Parent:

Thank you for choosing Regency Christian Academy for your child's care and education. We pray that in partnering together with your family, we will be able to continue to grow a Godly generation among the children that God leads to our school. Any questions about this enrollment package should be directed to the school office at 407-851-7270.

This enrollment package should contain the following and need to be returned for enrollment:

<input type="checkbox"/> RCA Enrollment Form	<input type="checkbox"/> Photography Consent Form
<input type="checkbox"/> PTO Enrollment Form	<input type="checkbox"/> Statement of Support
<input type="checkbox"/> Student Emergency Medical Form	<input type="checkbox"/> Parent Permission & Authorization Form
<input type="checkbox"/> Volunteer Form	<input type="checkbox"/> Extended Day Form
<input type="checkbox"/> Affidavit of Good Moral Character	

Many of these forms require the same information as other forms. However, please fill out all forms completely in spite of the repetition. In case of an emergency, all necessary information must be on the proper forms for medical personnel.

To enroll your child in a class at Regency Christian Academy, we must receive the completed forms listed above, the Registration Fee and the *documents listed below. When all forms, documents and registration fee have been received, and you have signed your Financial Contract (you will receive this when you give your packet to the school office), then your child's name will be placed on the enrollment roster.

***Other documents provided by parent or legal guardian; needed at registration, or prior to 1st day of school. Students cannot start without these:**

Copy of Birth Certificate
 Florida Certificate of Immunization (HRS Form 680)
 Student Health Examination (HRS-H Form 3040)

New Student Requirements:

Both HRS Forms must be provided by all new students at registration.

Preschool Requirements:

Due to the State of Florida requirements, all existing/returning students must have a current HRS-H 3040 on file every year. If your child is a returning student, please be prepared to provide this form at registration.

Middle School/Elementary Requirements:

Due to the FACCS (Florida Association of Christian Colleges and Schools) accreditation requirement all existing/returning students must have a current HRS-H 3040 on file every two (2) years. If your child is a returning student, please be prepared to provide this form at registration.

Registration fees are nonrefundable. Other fees required by RCA are listed on the Rates/Information Sheet included in this packet. It is important to understand that we do not accept requests for specific teachers. If you have a concern about the placement of your child next year regarding any special needs he or she may have, please indicate this on the Enrollment Form under Classroom Needs.



Growing a Godly Generation, One Child at a Time

Regency Christian Academy

A Ministry of South Orlando Baptist Church
 11513 South Orange Blossom Trail, Orlando, FL 32837
 Phone: 407-851-7270 fax: 407-859-1130
 E-mail: rca@rcaschool.com website: rcaschool.com

RCA's School Board and Administration are excited to announce that we continue to expand our class offerings and features with the implementation of new classrooms, after-school programs, and administrative options and offerings. During the coming year, we are committed to taking giant steps into the future to help maximize your investment in your child's academic, spiritual, physical, and emotional growth. We are grateful for your continued trust in and partnership with Regency Christian Academy and South Orlando Baptist Church.

- Sycamore Office Management System
- Flexible Online Payment Option
 - Continuing to Accept "4C" and "Step Up For Students" Scholarships
 - Continuing to Offer Sibling and SOBC Member Discounts
- \$200 Referral Credit for Signing up a New Family with RCA
- Interactive Website and Facebook pages
- Environmentally-Friendly Green Emphasis
- After-School Sports Program
- Family Support Classes/Life University
- Integrated Spanish Programs

Preschool

- Competitive Weekly Rate
- Computer/iPad in Every Classroom
- Security Cameras in Classrooms
- Themed Hallway and Classrooms
- VPK

Elementary

- Computer Lab/More Computer Programs
- Maximum Class Size of 18
- Expanded After-School Music Offerings
- Extra-Curricular Spiritual Development Opportunities
- Spanish

Middle School

- Classrooms in The Oasis
- Expanded Class Offerings/Teachers
- Exclusive Weekly Chapel in The Oasis
- After-School Community Service and Spiritual Development Opportunities
- iPad included with Book & Supply Package
- Computer Class in MAC Lab

Open Enrollment Begins Monday, February 9, 2015

Regency Christian Academy Referral Program

Are you aware that RCA has a student referral program? They say the best advertisement is "word of mouth". Here is how the RCA Referral Program works:

1. Be a current RCA family
2. Refer a new family to RCA
3. They enroll their child or children for the new academic school year (2015-2016)
4. New student(s) start the new school year
5. You will receive a referral credit of \$200.00 to your account (applied to Sept 2015 billings)



Regency Christian Academy has "Gone Green."

One of the ways we have done this is by reducing paper use.

By cutting down on paper copies, we will be:

- Promoting a healthier environment
- More fiscally responsible
- Able to apply money saved to other things:
 - Computer programs/labs
 - New books
 - Updating our classrooms
 - Playground equipment

During the 2015-2016 school year, all communications will be done via e-mail. It is very important that we have a current e-mail address for you in order to receive all important information. Please check our website and social media page/s for other items of interest.

- If you require a hard copy of your statements, there will be a fee of \$20 per semester.
- If you require a hard copy of the Parent & Student handbook, there will be a fee of \$10 per copy.



*Office Use Only – Packet received by:
(initial & date)

REGENCY CHRISTIAN ACADEMY ELEMENTARY ENROLLMENT FORM

HOW DID YOU HEAR ABOUT RCA? _____

Grade Applying For

_____ **K5** _____ **1st** _____ **2nd** _____ **3rd** _____ **4th** _____ **5th**

STUDENT INFORMATION

Name (Last, First, Middle):

Sibling# _____ of _____

Goes By:

Parent Cell#:

Parent E-mail:

Gender:

Student SS#:

Date of Birth:

Race:

Church Affiliation:

MEDICAL INFORMATION

Doctor:

Dentist:

Insurance: Y or N Name:

Dr. Address:

DDS Address:

Group#:

Dr. Phone#:

DDS Phone#:

Ins#:

Allergies:

Medicines Taking:

Parent(s) Name(s):

Current Address:

City:

State:

ZIP Code:

Home Phone:

FAMILY INFORMATION

Father's Name:		Student Resides With: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Current Address:			
City:	State:	ZIP Code:	
E-mail Address:			
Cell Phone:	Home Phone:		
SS#:	Driver's License#:		
Employer:	Occupation:	Work Phone:	
Birthdate:			
Marital Status:	Spouse:		
Mother's Name:		Student Resides With: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Current Address:			
City:	State:	ZIP Code:	
E-mail Address:			
Cell Phone:	Home Phone:		
SS#:	Driver's License#:		
Employer:	Occupation:	Work Phone:	
Birthdate:			
Marital Status:	Spouse:		

DISCHARGE/EMERGENCY CONTACT INFORMATION

Any changes to this list must be received in writing.

Persons permitted to remove child from RCA: Mother: Yes No **Father:** Yes No

In case of illness or emergency, an attempt is made to contact parents/guardians. In the event parents/guardians cannot be reached, please advise other person(s) who should be notified or who can remove the child from Regency Christian Academy:

(1) Discharge Contact _____ Emergency Contact _____

Name:	Relationship:	Phone:
Address:		Cell Phone:
City, State ZIP		Work Phone:
Driver's License #:		

(2) Discharge Contact _____ Emergency Contact _____

Name:	Relationship:	Phone:
Address:		Cell Phone:
City, State ZIP		Work Phone:
Driver's License #:		

(3) Discharge Contact _____ Emergency Contact _____

Name:	Relationship:	Phone:
Address:		Cell Phone:
City, State ZIP		Work Phone:
Driver's License #:		

Other Children in the Home:

PARENT SIGNATURE

I hereby acknowledge that the information provided on this Enrollment Form is true and accurate. I understand that any misrepresentation of information could result in the immediate withdrawal of my Child from Regency Christian Academy.

Parent/Guardian Signature:

Date:

Parent/Guardian Signature:

Date:

RCA does not discriminate on the basis of race, color, religion or nationality in the admission of students.

***** **OPTIONAL** *****

The following survey is not an entrance requirement for this school

Regency Christian Academy is listed as a private school in the State of Florida. The National Center for Education Statistics (NCES) of the U.S. Department of Education requests percentage breakdowns in various areas, among them race / cultural origin. We voluntarily submit numerical information on a yearly basis. The data is used to develop a profile of providers of private education in the United States.

The enrolled student is:

- American Indian or Alaska Native (Aleut, Alaska Indian, Yupik, Inupiat).
- Asian or Pacific Islander (Japanese, Chinese, Filipino, Korean, Asian Indian, Vietnamese, Hawaiian, Guamanian, Samoan, other Asian).
- Hispanic, regardless of race (Mexican, Puerto Rican, Cuban, Central or South American or Other Hispanic culture or origin).
- Black, not of Hispanic origin.
- White, not of Hispanic origin.
- Other: _____

Regency Christian Academy

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Phone: 407-851-7270 fax: 407-859-1130

E-mail: rca@rcaschool.com website: rcaschool.com

Parents'/Guardians' Statement of Support

1. We have received and read the "Statement of Doctrinal Beliefs" of Regency Christian Academy, and are willing to have our child (ren) educated in accordance with them.
2. We have received and will read a copy of the "Parent Student Handbook" (available online). The Handbook, which governs our entire school, outlines our beliefs and policies. Parents and students agree to abide by the rules and standards contained therein and will be held accountable to follow all RCA Policies and Procedures as stated in the "Parent Student Handbook."
3. We will fully cooperate in the educational activities of Regency Christian Academy by doing our best to make Christian education effective in the lives of our children. We will accomplish this by having our child on time to school each day, emphasizing the importance of schoolwork, and teaching our child to follow the rules of student conduct and expectations.
4. We will show support for our child's teacher and establish a relationship of trust. We will communicate clearly with the teacher all concerns about behavior, academics, etc. when our child brings home information from the classroom and follow up with appropriate consequences to support the discipline given.
5. We will require our children to support spiritual activities of Regency Christian Academy (Chapel, Scripture memory, etc...).
6. We will volunteer for duties and responsibilities by my child's teacher and/or the school as opportunities arise, and God provides the time and strength.
7. We will be faithful to attend, to the best of our ability, all parent functions at Regency Christian Academy.
8. We will pay all our financial obligations to Regency Christian Academy on or before the due date.

(over please)

Mission statement

To provide an excellent education in a loving and nurturing environment where we strive to grow, serve and reach our community for Christ.

RCA Goals

1. To provide every child and parent the opportunity and understanding necessary to accept Jesus Christ as his or her Savior when ready.
2. To provide an academically superior Christian education for preschool, elementary, and middle school students.
3. To model and train children to become leaders of integrity through Bible-based character development.

Partnering With RCA

1. In signing, I and my family members agree to support the mission, goals, classroom rules and the RCA Handbook. If we become dissatisfied with Regency Christian Academy in any way, we will resolve the matter with the RCA Staff involved, rather than spreading gossip/rumors and negativity (Matt. 18:15-17; 5:23-24). We pledge that if, for any reason, our child does not respond favorably to the school, we will not try to change the school, but will withdraw him/her quietly and immediately. We understand the school reserves the right to dismiss any student when either the parents/guardians or the student does not cooperate with the policies of the school as set forth in the Parent/Student Handbook and Statement of Support.

2. Arbitration Requirements

We agree that, for many reasons, lawsuits and court actions are disadvantageous to both RCA/SOBC employees and our families. Therefore, we agree that any claim or dispute between them or against the school or any agent or employee of the school, whether related to the educational relationship or otherwise, including those created by practice, common law, court decision, or statute, now existing or created later, including any related to allegations of violations of state or federal statutes related to discrimination, and all disputes about the validity of this arbitration clause, shall be resolved by neutral binding arbitration by the American Arbitration Association, under the rules of procedure in effect at the time any claim is made. (Each party shall pay its own costs of arbitration.) This agreement is subject to the Federal Arbitration Act and any award of the arbitrator(s) may be entered as a judgment in any court of competent jurisdiction. Information may be obtained and claims may be filed at AAA Case Filing Services: 1101 Laurel Oak Rd, Suite 100, Voorhees, NJ 08043, (877)495-4185, website: www.adr.org.

BY SIGNING THIS AGREEMENT, THE PARTIES ARE GIVING UP ANY RIGHT THEY MIGHT HAVE TO SUE EACH OTHER. **We understand and support the school's mission statement, goals and agree with the above:**

 Date

 Parent/Guardian Signature

 Administrative Signature

 Parent/Guardian Signature

____ I would like a copy of this document

STATEMENT OF DOCTRINAL BELIEFS

Regency Christian Academy (as in agreement with Constitution and Bylaws of South Orlando Baptist Church)

DOCTRINE OF THE BIBLE: We believe that the entire Bible, all 66 books of the combined Old and New Testaments are inspired by God and are inerrant in original writings. The work of God is the only infallible and authoritative rule of faith and practice. (II Timothy 3:16-17, II Peter 1:20-21)

DOCTRINE OF GOD: We believe that there is only one true and eternally existent God. He exists co-equally in three persons – God the Father, God the Son, and God the Holy Spirit. These three are the same in essence, but distinct in personality. (Isaiah 45:21, John 14:16, 26)

DOCTRINE OF JESUS CHRIST: We believe that Jesus Christ is the only begotten Son of God and the second Person of the Triune God. He was conceived by the Holy Spirit, born of a virgin, lived a sinless life and performed many miracles. We believe Jesus Christ died a substitutionary sacrifice on the cross to pay the debt for our sins, was buried, bodily resurrected and ascended to the right hand of God the Father. We believe He will return literally, visibly and personally in glory and power. (John 1:1-3, 14; Matthew 1:18-25; Philippians 2:5-9; I Corinthians 15:1-8, 17; Acts 1:9-11)

DOCTRINE OF THE HOLY SPIRIT: We believe that the Holy Spirit is the third Person of the Triune God. He is the chief convictor of sin, the chief agent of regeneration (regeneration meaning to cause to be born again or change from a natural to a spiritual state). The Holy Spirit is also the chief agent of sanctification (which means to be set apart). The Holy Spirit lives within every believer and empowers every believer to live a Godly life. (John 14:16-19; 16:7-15; I Corinthians 6:19-20; Romans 8:9-11; Titus 3:5)

DOCTRINE OF ANGELS: We believe that angels are spirit beings, which God has created. They are not the same beings as God or man, but instead a third type of being. Angels have a great and wide ministry, some of which are: ministering to Christian believers (Hebrews 1:14), bringing answers to prayers (Daniel 9:21-22, Acts 12:5-7), encouraging in times of danger (Acts 27:23-24) and helping to deliver in times of danger (Acts 5:19, 12:7-10).

DOCTRINE OF SIN: We believe that sin originated with Adam and Eve. This act resulted in the fall of all mankind; therefore, all people have sinned. We believe every person's sin incurs both physical and spiritual death until there is forgiveness and salvation by the grace of God. (Genesis 3:1-24; Romans 3:10-23; 5:12-21; 6:23)

DOCTRINE OF SALVATION: We believe that salvation of lost and sinful people is a free gift of God's grace apart from human works. We believe salvation is received only through faith in the Person and finished work of Jesus on the cross and His resurrection from death. (Ephesians 2:8-10, 11 Corinthians 5:21)

DOCTRINE OF THE CHURCH: We believe that the church is the body of Christ and the family of God. It is made up of saved and baptized believers, who regularly join together for worship, fellowship, and ministry. (Matthew 16:18; 1 Corinthians 12:12-14; Hebrews 10:25)

DOCTRINE OF EVANGELISM: We believe that it is the responsibility and privilege of every Christian to proclaim the good news of Jesus Christ and to seek to make growing disciples. (Matthew 28:18-20; Acts 1:8)

THE HOME: In addition to these important beliefs, we also believe that God has given the parents of the home the responsibility to bring up their children in the nurture and admonition of the Lord (Ephesians 6:4; Proverbs 22:6). We believe that a consistent and whole education will occur when home, church and school work closely together and are in agreement on the basic concepts of life.

Regency Christian Academy
STUDENT EMERGENCY MEDICAL FORM
2015-2016

Student's Name: _____

Grade: ____ Age: ____ DOB: _____ Gender: ____ M ____ F Social Security #: _____

Address: _____

Mother's Name: _____ Daytime Phone Number: _____

Father's Name: _____ Daytime Phone Number: _____

Legal Guardian: _____ Daytime Phone Number: _____
(If not parents)

Insurance & Medical Personnel Information

Insurance Provider: _____

Policy Holder: _____

Policy Number: _____ Group Number: _____

Physician: _____ Office Phone: _____

Dentist: _____ Office Phone: _____

Surgeon: _____ Office Phone: _____

Orthopedist: _____ Office Phone: _____

Other: _____ Office Phone: _____

Preferred Hospital(s): _____
(Responding medical unit will make final determination as to the appropriate facility for the injury)

Known Allergies

Foods: _____

Medications: _____

Others: _____

Student Health

Explain any health considerations or medical conditions: _____

Routine medications & dosages: _____

Signature of Parent/Guardian Date

Signature of Parent/Guardian Date

Regency Christian Academy
PARENT PERMISSION & AUTHORIZATION FORM
2015-2016

Student's Name: _____

Grade: ____ **Age:** ____ **DOB:** _____ **Gender:** ____ **M** ____ **F** **Social Security #:** _____

School Health Service Consent

- I hereby give consent for my child to receive simple first aid treatment for minor scraps, bruises, etc. by the staff of Regency Christian Academy. An Accident/Incident form will be submitted to me at the time my child is picked up explaining the accident or incident, and the treatment that was administered. Only medication, including prescription topical treatments, from the parent/guardian with an Authorization for Medication form will be given to a student at RCA.
- In case of an accident or illness, where medical treatment is not needed, but where my child is unable to remain at school, I request the school to contact me (us). If I am unable to be reached, one of the persons listed as an Emergency Contact on my Enrollment Form may be contacted to pick up my child from school.
- In the event of a serious or life threatening accident or illness, I request the school to contact me (us) first. If the school is unable to reach me (us), I understand that the school will contact the 911 emergency medical system immediately. I agree to be financially responsible for this child's care and treatment.

 Signature of Parent/Guardian Date

 Witness Date

 Signature of Parent/Guardian Date

In the event of any emergency, RCA will access the 911 Emergency System. If you would like to give them advance permission to begin transport and treatment of your child, please sign the following statements:

Permission to Transport Statement

I do hereby state that I am the parent or guardian of the child named on this form. In order to expedite care of this child, I hereby give my permission for the responding emergency team to immediately initiate treatment and transport of my child to the preferred or appropriate medical facility, according to what they deem is appropriate by the nature or extent of the injuries. I agree to be financially responsible for this child's treatment and transport. I will notify the school of any changes of this information in writing.

 Signature of Parent/Guardian Date

 Witness Date

 Signature of Parent/Guardian Date

Permission to Treat Statement

I do hereby state that I am the parent or guardian of the child named on this form. In order to expedite care of this child, I give my permission for the appropriate medical personnel and staff to initiate treatment immediately upon arrival to the appropriate facility. I agree to be financially responsible for this child's treatment. I also request that I be notified of my child's condition and admission as soon as possible.

 Signature of Parent/Guardian Date

 Witness Date

 Signature of Parent/Guardian Date

Regency Christian Academy

EXTENDED DAY PROGRAM 2015-2016

Regency Christian Academy offers classes for students in Full time Preschool 2 through 8th grade Middle School. Our academic school day runs from 8:30 a.m. to 3:00 p.m., however, children may be brought to their appropriate classroom as early as 8:15 a.m. and is not considered "being picked up late" until after 3:15 p.m. If a parent is in need of care for their child before and/or after the academic day, RCA offers an Extended Day Program.

Extended Day hours: Before-school care is offered from 7:00 a.m. to 8:15 a.m. No care is available prior to 7:00 a.m. After-school care is offered from 3:00 p.m. to 6:00 p.m. No care is available after 6:00 p.m.

Before-school care: In the mornings, parents bring children directly to the school cafeteria and sign them in on the class sign-in sheet. A breakfast "snack" is offered from 7:00 a.m. to 7:45 a.m. or children may bring their own breakfast.

After-school care: In the afternoons, the Extended Day Leaders will pick up Elementary and Middle students at 3:00 p.m. Afternoon snacks are provided and served in the school cafeteria. The remainder of the day the children may participate in organized games, have free time outside or in the gym, participate in study hall to complete homework, watch a video, read, etc. In the afternoon, Full time Preschool students enrolled in Extended Day will remain in their classrooms and will participate in a variety of organized activities specific to their age group. Occasionally, preschool classes may be combined for Extended Day activities.

Costs: The Extended Day Program is offered for at a cost of \$60 per week for care before and after the academic day, regardless of the amount of time attended by the student. A student only requiring care before the academic day may pay a fee of \$15 per week. A student only requiring care after the academic day may pay a fee of \$55 per week. Payment of these fees will be due on Monday. A late payment fee of \$15 will be charged to your account if Extended Day fees are not paid by 6:00 pm Thursday of the same week. If Extended Day fees become more than 2 weeks past due your child will be withdrawn for the Extended Day program. Extended Day fees are billed one week in advance, with the first weekly payment due August 17, 2015 and the second weekly payment due August 24, 2015 The Extended Day fee is not prorated for holidays, absences, teacher planning days, withdrawals, etc.

How do I enroll? To enroll your child in the Extended Day Program, please fill out the form below and return with all other school enrollment paperwork. A written request, one week in advance, must be received to withdraw a child from the Extended Day Program.

 Yes, I wish to enroll my child in the Elementary Extended Day Program

Child's Name: _____ Grade: _____

My child will be attending Extended Day: Before School After School Both

*If attending Extended Day in the afternoon, my child will be picked up at approximately _____ p.m.

Parental Consent Form Photography, Media and Website

During the year there are occasions when photographs of your child may be taken by Regency Christian Academy or South Orlando Baptist Church staff. Your authorization to use photo/s of your child in publications (brochures, programs, newsletters, etc.) is requested. Please sign the photography section to provide RCA with consent for photo usage.

Websites & Social Media

The Regency Christian Academy website (www.rcaschool.com) and the South Orlando Baptist Church's website (www.southorlandobaptist.org) contains web pages for our organization. This tool is used to help the community learn more about our organizations and allows us to highlight achievements and activities. Anyone with the internet is able to access these pages from virtually anywhere in the world. Individual or group photos may be used on our website to showcase events. Please sign the website section to provide the organization with consent for use of photo/s on our web pages.

Security Cameras

RCA has installed security cameras in the preschool classrooms for parents to access via the internet. Each parent with a child in the same preschool class will see all students participating within the classroom.

Consent

Signing this form will be deemed as consent for Regency Christian Academy and South Orlando Baptist Church to allow your child to participate as specified below for the 2015-2016 school year. PLEASE COMPLETE THE FOLLOWING:

I, (print name) _____, parent or official guardian of

(Child's name) _____ hereby grant permission to Regency Christian Academy, its employees or representatives, to take and use:

_____ Photographs/digital images

_____ Videotape

_____ Audio recording or quoted remarks of my child for use in promotional or educational materials as follows:

_____ Printed publications or materials

_____ Electronic publications or presentations

_____ Web sites

Signature of Parent/Guardian

Date

Witness

Date

Signature of Parent/Guardian

Date

Regency Christian Academy

Parent Teacher Organization (PTO)

Regency Christian Academy would like to welcome you to their Parent Teacher Organization. The PTO has been found to be a great asset to the enhancement of our school and our children. The importance of participation and investment in our children's lives is tremendous. What we are able to do for our school when we have the support of our parents and teachers is incredible. In turn, our children will be able to reap the benefits.

The purpose of Regency Christian Academy's PTO is "to enrich the children's lives through Christian principles and education and personal development, and to work closely with the school administration and staff to support and enhance school growth and development".

The PTO is involved with special functions throughout the school year. These include fundraisers, bake sales, room parent programs, book fairs, and special enhancement programs like better playgrounds for our children. This year, the PTO has assisted with the purchase of Mac computers for our computer lab and will continue to purchase computers and learning programs to update our lab. Due to the support of all PTO members, we are able to come together as a team of parents and teachers who truly are getting involved in the lives of their children.

The PTO has an annual fee of \$15.00 for membership. Each family that is attending RCA is required to be a member. These fees stay in a designated PTO account. PTO General Meetings are held three times within the school year. Families are encouraged, but not required to attend. These meetings are important in the decision making of certain functions, fundraisers, and anything that the PTO is planning. The PTO needs parent and teacher input and ideas concerning the use of time and resources to maximize the benefit to RCA students.

The \$15.00 membership fee is due upon enrollment. Please make your check payable to Regency Christian Academy. Complete the enrollment form at the bottom and return it along with your payment and registration packet.

Regency Christian Academy PTO Enrollment Form

Name _____ Telephone # _____

Address _____

City _____ State _____ Zip Code _____

Email address _____

Name(s) & grade level(s) of child (Ren) attending
RCA _____

2015-2016

VOLUNTEER INFORMATION & AGREEMENT FORM

FOR VOLUNTEERS OF REGENCY CHRISTIAN ACADEMY

This form is to be completed *annually* for any Volunteer of Regency Christian Academy. This is being used to provide a safe and secure environment for the activities or programs of our school. All information provided is considered confidential and will be kept in a lock-secured area.

PERSONAL INFORMATION

Name _____ Date of Birth _____

Last First Middle

Are you the parent_____, legal guardian_____, or relative_____ of a student at RCA?

Student's Name: _____

Student's Grade: _____ Student's Teacher: _____

DL# _____ State Issued _____

Present Address _____

City _____ State _____ Zip Code _____

Phone _____ Email _____

Occupation _____ Work Phone _____

If less than one year:

Previous Address _____

City _____ State _____ Zip Code _____

Phone _____ Email _____

Occupation _____ Work Phone _____

Please list 3 personal references:

Name	Relationship	Phone Number
_____	_____	_____
_____	_____	_____
_____	_____	_____

*NOTE: In addition to this 3 page Volunteer Information and Agreement Form, there is an attached Affidavit of Good Moral Character. This document only has to be signed and notarized annually. Any questions can be directed to the Office Manager, Events Coordinator or the Principal. All forms should be returned to the Administration Personnel directly, or left in the school office in a sealed envelope.

VOLUNTEERING INFORMATION

Please list any area(s) of expertise, hobby, talent, travel experience, etc. that you would be willing to share with students of RCA upon a teacher's request:

I am interested in volunteering for RCA as a (n):

- Field Trip Chaperone Classroom Helper (die cutting, sort papers, etc.)
 Office Helper Reading Buddy (read to or listen to students read)
 Extended Day Helper Special Event Helper (book fairs, programs, etc.)
 Other: _____

VOLUNTEER CODE OF ETHICS AND RULES

While acting in my capacity as a Regency Christian Academy Volunteer the following rules shall apply:

- 1) Smoking or using tobacco products in the presence of minors or anywhere on campus is prohibited.
- 2) Using, possessing, or being under the influence of alcohol, illegal, or illicit drugs will not be tolerated.
- 3) Bringing contraband and or dangerous items such as but not limited to firearms, weaponry and fireworks on RCA property or in the presence of minors is prohibited.
- 4) Volunteers of minors shall not abuse such minors, including:
 - Any direct observations or evidence of sexual activity in the presence of or in association with a minor;
 - Any display or demonstration of sexual activity, abuse, insinuation of abuse, or evidence of abusive conduct towards a minor;
 - Sexual advances or sexual activity of any kind to a minor(s);
 - Corporal punishment or physically abusive behavior or bodily injury to a minor;
 - Physical neglect of a minor, including failure to provide adequate supervision in relation to the activities of Regency Christian Academy.
 - Mental or emotional injury to a minor;
 - The presence or possession of obscene or pornographic materials at any function of Regency Christian Academy.

- 5) Willingness to periodically update needed information and forms.
- 6) Volunteers must treat all people of all races and cultures with respect and consideration.
- 7) Volunteers shall not use or tolerate the use of profanity in the presence of minors.
- 8) Volunteers must be free of physical and psychological conditions that might adversely affect any minor's health, including, but not limited to, contagious disease.
- 9) Volunteers will portray a positive role model for minors by maintaining an attitude of respect, loyalty, patience, courtesy, and maturity.
- 10) Volunteers will be expected to act and react with Christian love and understanding in all situations.
- 11) Volunteers will do everything in their power to avoid being put in a situation where they are alone with a minor other than their own child.
- 12) I understand that as a Volunteer with minors for Regency Christian Academy, I *may* be subject to, as requested, a background check, including criminal history.
- 13) I understand that any violation of this code may be grounds for removal as a Volunteer with minors.

I understand that in serving as a Volunteer for Regency Christian Academy that I am willing to abide by the Policies & Procedures set forth in the Parent & Student Handbook and the Volunteer Code of Ethics & Rules. I understand that some RCA Volunteers who will be in direct contact with students extended and consistent amounts of time may be required to submit to a local background check or even a full national background check. I understand that I am offering my services to RCA without compensation. I certify that all information given on this application is true and complete. I understand that any misrepresentation, omission or incorrect statement of facts called for in this application is cause for my immediate dismissal as a volunteer.

Signature of Volunteer

Date

Principal

Date



AFFIDAVIT OF GOOD MORAL CHARACTER

State of Florida

County of _____

Before me this day personally appeared _____ who, being duly
(Applicant's/Employee's Name)

Sworn, deposes and says:

As an applicant for employment with, an employee of, a volunteer for, or an applicant to volunteer with Regency Christian Academy, I affirm and attest under penalty of perjury that I meet the moral character requirements for employment, as required by the Florida Statutes and rules, in that:

I have not been arrested with disposition pending or found guilty of, regardless of adjudication, or entered a plea of nolo contendere or guilty to or have been adjudicated delinquent and the record has not been sealed or expunged for, any offense prohibited under any of the following provisions of the Florida Statutes or under any similar statute of another jurisdiction for any of the offenses listed below:

Relating to:

Section 393.135	sexual misconduct with certain developmentally disabled clients and reporting of such sexual misconduct
Section 394.4593	sexual misconduct with certain mental health patients and reporting of such sexual misconduct
Section 415.111	adult abuse, neglect, or exploitation of aged persons or disabled adults or failure to report of such abuse
Section 741.28	criminal offenses that constitute domestic violence, whether committed in Florida or another jurisdiction
Section 782.04	murder
Section 782.07	manslaughter, aggravated manslaughter of an elderly person or disabled adult, or aggravated manslaughter Of a child
Section 782.071	vehicular homicide
Section 782.09	killing an unborn quick child by injury to the mother
Chapter 784	assault, battery, and culpable negligence, if the offense was a felony
Section 784.011	assault, if the victim of offense was a minor
Section 784.03	battery, if the victim of offense was a minor
Section 787.01	kidnapping
Section 787.02	false imprisonment
Section 787.025	luring or enticing a child
Section 787.04(2)	taking, enticing, or removing a child beyond the state limits with criminal intent pending custody proceeding
Section 787.04(3)	carrying a child beyond the state lines with criminal intent to avoid producing a child at a custody hearing or delivering the child to the designated person
Section 790.115(1)	exhibiting firearms or weapons within 1,000 feet of a school
Section 790.115(2) (b)	possessing an electric weapon or device, destructive device, or other weapon on school property
Section 794.011	sexual battery
Former Section 794.041	prohibited acts of persons in familial or custodial authority
Section 794.05	unlawful sexual activity with certain minors
Chapter 796	prostitution
Section 798.02	lewd and lascivious behavior
Chapter 800	lewdness and indecent exposure
Section 806.01	arson
Section 810.02	burglary
Section 810.14	voyeurism, if the offense is a felony
Section 810.145	video voyeurism, if the offense is a felony
Chapter 812	theft and/or robbery and related crimes, if a felony offense
Section 817.563	fraudulent sale of controlled substances, if the offense was a felony
Section 825.102	abuse, aggravated abuse, or neglect of an elderly person or disabled adult
Section 825.1025	lewd or lascivious offenses committed upon or in the presence of an elderly person or disabled adult
Section 825.103	exploitation of disabled adults or elderly persons, if the offense was a felony
Section 826.04	incest
Section 827.03	child abuse, aggravated child abuse, or neglect of a child
Section 827.04	contributing to the delinquency or dependency of a child
Former Section 827.05	negligent treatment of children
Section 827.071	sexual performance by a child
Section 843.01	resisting arrest with violence

CONTINUED ON NEXT PAGE

Section 843.025	depriving a law enforcement, correctional, or correctional probation officer means of protection or communication
Section 843.12	aiding in an escape
Section 843.13	aiding in the escape of juvenile inmates in correctional institution
Chapter 847	obscene literature
Section 874.05(1)	encouraging or recruiting another to join a criminal gang
Chapter 893	drug abuse prevention and control only if the offense was a felony or if any other person involved in the offense was a minor
Section 916.1075	sexual misconduct with certain forensic clients and reporting of such sexual conduct
Section 944.35(3)	inflicting cruel or inhuman treatment on an inmate resulting in great bodily harm
Section 944.40	escape
Section 944.46	harboring, concealing, or aiding an escaped prisoner
Section 944.47	introduction of contraband into a correctional facility
Section 985.701	sexual misconduct in juvenile justice programs
Section 985.711	contraband introduced into detention facilities

THE FOLLOWING APPLIES ONLY TO THOSE APPLICANTS FOR MENTAL HEALTH POSITIONS

In addition to the Chapter 435, F.S., listed offenses, the following offenses are also applicable for "Mental Health Personnel" screened pursuant to section 394.4572, F.S., defined as program directors, professional clinicians, staff members, or volunteers working in a public or private mental health program or facility who have direct contact with individuals held for examination or admitted for mental health treatment. **The additional offenses apply only to "Mental Health Personnel" as determined pursuant to Section 408.809, F.S. as listed below:**

	Relating to:
Chapter 408	felony offenses contained in Chapter 408
Section 408.8065(3)	offers service or skilled service without valid license when licensure is required, or knowingly files a false or misleading license or license renewal application, or submits false or misleading information related to application
Section 409.920	Medicaid provider fraud
Section 409.9201	Medicaid fraud
Section 817.034	fraudulent acts through mail, wire, radio, electromagnetic, photoelectronic, or photooptical systems
Section 817.234	false and fraudulent insurance claims
Section 817.505	patient brokering
Section 817.568	criminal use of personal identification information
Section 817.60	obtaining a credit card through fraudulent means
Section 817.61	fraudulent use of credit cards, if the offense was a felony
Section 831.01	forgery
Section 831.02	uttering forged instruments
Section 831.07	forging bank bills, checks, drafts or promissory notes
Section 831.09	uttering forged bank bills, checks, drafts, or promissory notes
Section 831.30	fraud in obtaining medicinal drugs
Section 831.31	the sale, manufacture, delivery, or possession with the intent to sell, manufacture, deliver any counterfeit controlled substance, if the offense was a felony.

I also affirm that I have not been designated as a sexual predator pursuant to s. 775.21; a career offender pursuant to s. 775.261; or a sexual offender pursuant to s. 943.0435, unless the requirement to register as a sexual offender has been removed pursuant to s. 943.04354.

I understand that I must acknowledge the existence of any applicable criminal record relating to the above lists of offenses including those under any similar statute of another jurisdiction, regardless of whether or not those records have been sealed or expunged. Further, I understand that, while employed or volunteering at _____ in any position that requires background screening as a condition of employment, I must immediately notify my supervisor/employer of any arrest and any changes in my criminal record involving any of the above listed provisions of Florida Statutes or similar statutes of another jurisdiction whether a misdemeanor or felony. This notice must be made within one business day of such arrest or charge. Failure to do so could be grounds for termination.

CONTINUED ON NEXT PAGE

I attest that I have read the above carefully and state that my attestation here is true and correct that **my record does not contain any of the above listed offenses.** I understand, under penalty of perjury, all employees in such positions of trust or responsibility shall attest to meeting the requirements for qualifying for employment and agreeing to inform the employer immediately if arrested for any of the disqualifying offenses. I also understand that it is my responsibility to obtain clarification on anything contained in this affidavit which I do not understand prior to signing. I am aware that any omissions, falsifications, misstatements or misrepresentations may disqualify me from employment consideration and, if I am hired, may be grounds for termination or denial of an exemption at a later date.

SIGNATURE OF AFFIANT: _____

Sign Above OR Below, DO NOT Sign Both Lines

To the best of my knowledge and belief, **my record contains one or more of the applicable disqualifying acts or offenses listed above. I have placed a check mark by the offense(s) contained in my record.** (If you have previously been granted an exemption for this disqualifying offense, please attach a copy of the letter granting such exemption.) (Please circle the number which corresponds to the offense(s) contained in your record.)

SIGNATURE OF AFFIANT: _____

Sworn to and subscribed before me this _____ day of _____, 20____.

SIGNATURE OF NOTARY PUBLIC, STATE OF FLORIDA

(Print, Type, or Stamp Commissioned Name of Notary Public)

(Check one)

Affiant personally known to notary

OR

Affiant produced identification

Type of identification produced: _____

2015-2016

Uniform Information

Alpha Specialties in Kissimmee will once again be serving our uniform needs for the 2014-2015 school year. The people there are wonderful to work with and have been very accommodating, making the uniform process an easy one.

Alpha would like each child to be sized. This can be done two ways:

- 1) **PREFERRED WAY:** Go to Alpha Specialties, they will size your child and you can order right on the spot, later on, or online. At least you know what size is needed.
- 2) You may purchase uniforms online at www.alpha-specialties.com.

Payment is due when the order is placed. Most orders are completed in 1 week. Back to school is a busy time for them, so please try and place orders early.

All shirts need to have the RCA crest embroidered on them. If you decide to bring in a jumper or shirt, Alpha Specialties can embroider the crest on what you take to them for a charge of \$5.00.

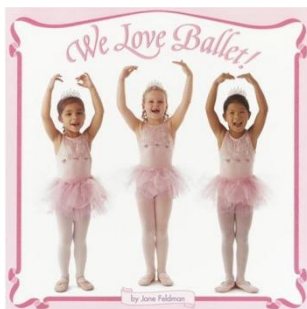
- Preschool: Navy, white, grey or pink polo's or t-shirts, long or short sleeved
- Elementary: Navy, white, hunter green and red polo's, long or short sleeved
- Middle School: Navy, white, light blue or royal blue polo's, long or short sleeved

All students (PK4-8th Grade) are required to wear navy blue or khaki pants, shorts or skorts. Jumpers can be worn, embroidered with the crest. Grey printed t-shirts may be worn for PE days. Crew neck and zippered, hooded sweatshirts are also available.

Although it is not mandatory to get the uniform bottoms from Alpha, they have a variety of sizes in pants, shorts and skorts available to us to fill all your uniform needs at one location.

Alpha Specialties has set up our own school ordering section on their website for your ordering needs. Go to www.alpha-specialties.com, go under school uniforms and look for Regency Christian Academy. It will then be broken down into grades (preschool, elem. and middle) as to what is available for each one. The prices are also shown. You may then place your order from there. Please feel free to contact Dawn Kent at RCA (407-851-7270) if there are any questions or concerns.

ALPHA SPECIALTIES
305 Bass Street
Kissimmee, FL 34741
407-847-9002
www.alpha-specialties.com



RCA Dance Classes

Dear Parents/Guardians:

Using the Art of Dance, children learn grace, poise, rhythm, and self-expression and improve coordination. Learning dance also helps children to develop a positive self-image. Because of the positive influence dance can have on the life of a child, ten years ago, RCA began offering an afternoon Dance Program for enrolled students.

Beginning September 8, 2015, RCA and I will be offering the following dance classes:

- ❖ Ballet combined w/ Novelty Jazz (Preschool 4 – 8th grade)
- ❖ Ballet & Tap combo (1st grade – 4th grade)
- ❖ Jazz & Tap Only for Intermediate Students (4th grade – 8th grade)
- ❖ Intermediate & Advanced Ballet (4th grade-8th Grade)

Classes will be held once a week for 45 minutes and offered on Tuesdays, Wednesdays, and Thursdays at 3:15pm and 4:30pm. Dance students will be instructed in and learn barré, line and center work with Ballet, Jazz and Tap combinations. Classes are kept to a maximum of 10 students and are filled on a first come, first served basis. The Annual RCA Dance Recital will be held on Thursday,

While Art, Music, Physical Education and Praise in Motion are part of RCA's school year curriculum and are covered by tuition payments, fees for dance classes are in addition to tuition and other school related fees.

In addition to dance class registration fee and the monthly dance class fee, participating students must supply their own dance attire for classes and rehearsals. The following is the required dance attire:

- ❖ Ballet\Jazz Class:
 - Girls: black, short-sleeved leotards, lt. pink tights & lt. pink ballet slippers.
 - Boys: white t-shirt, black pull-on shorts & black ballet slippers.
- ❖ Tap Class: Black tap shoes

Dance Recital costumes will be ordered when needed at an additional charge.

If you are interested in registering your child for any of the available dance classes, please complete the attached form and return it to the school office along with the \$32 dance registration fee and first monthly payment of \$35 no later than August 17, 2015. Enrollment forms will be accepted after August 17th only if space is still available. There is no exception to this rule, therefore remember that enrollment is on a first come, first serve basis and that classes fill up quickly.

Specific questions about any of the available dance classes can be directed to me by calling the school office and leaving a message. I will gladly return inquiry calls concerning our dance classes.

Sincerely,

Mrs. Maxine Rando
RCA Dance Instructor

PS: Only one child per enrollment form. If additional forms are needed for multiple children enrolling, please contact the school office at 407-851-7270.

Regency Christian Academy Registration for Ballet/Novelty Jazz And Tap Classes

(One child per enrollment form)

Student Information

Name _____ Age _____
(As of Sept. 1, 2015)

Address _____ Class/Grade _____

_____ Phone # _____

Schedules: Check each class your child is enrolling.

_____ Tuesday @ 3:15pm: 1st & 2nd Grade (Ballet & Tap Combo Only)

_____ Tuesday @ 4:15pm: K5 (Ballet & Novelty Jazz)

_____ Wednesday @ 3:15: 3rd-4th (Ballet & Tap Combo only)

_____ Wednesday @ 4:00:4th- 8th Grade (Intermediate Ballet)

_____ Wednesday @ 4:45: Intermediate Jazz & Tap

_____ Thursday @ 3:15pm: PS4 (Ballet & Novelty Jazz)

_____ Thursday @ 4:30pm: 4th - 8th Grade (Intermediate & Advanced Ballet)

Mother's Name _____

Father's Name _____

Work Phone _____

Work Phone _____

Cell Phone _____

Cell Phone _____

Permission to pick up student is granted to:

Name _____

Name _____

Relationship _____

Relationship _____

Work Phone _____

Work Phone _____

Cell Phone _____

Cell Phone _____

Regency Christian Academy Dance Class Agreement

I, _____, parent or guardian of _____, agree to have my child educated in Ballet/Novelty Jazz and/or Tap Class at Regency Christian Academy. I agree to hold harmless Regency Christian Academy and all its employees, agents, trustees, administrators, and any or all other representatives in the event of any injury to my child, even serious injury resulting in loss of mobility, permanent disability, or loss of limb or life. I understand and agree that if my child is injured, my own insurance is primary and the Student Accident Insurance carried by RCA is secondary.

I, _____, parent or guardian of _____, agree to the following fees:

\$32.00 Registration Fee (form and fee due by Monday, August 17, 2015)

\$350.00 Dance Class annual tuition (per enrolled class) **

****Tuition may be paid in full on or before Monday, August 17, 2015 to receive a discount of 10% or can be billed in ten payments of \$35.00 each in the following manner:**

First monthly tuition fee is due at time of registration along with the registration fee on or before Monday, August 17, 2015. Subsequent monthly tuition fees are due on the first day of each month beginning on September 1, 2015 with the last payment due on May 1, 2016.

I, _____, parent or guardian of _____, understand that tuition fees will not be prorated for school closings, including holidays or lack of attendance by my child.

If I choose to withdraw my child from dance, I agree to give written notice on or before the first of the month prior to the month of withdrawal. I agree to provide appropriate attire for rehearsal and pay any costs necessary for recital costumes for my child when payment is due.

Signature of Parent/Guardian

Date