



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
Email: rca@rcaschool.com | Webpage: www.rcaschool.com

For the Finance Office

Date Enrolled: _____

Initials: _____

Secondary School Student Enrollment 2025-2026

Student Information

Admission Enrollment Checklist

Last Name:	<input type="checkbox"/> Application Fee (non-refundable)
First Name:	<input type="checkbox"/> Copy of Birth Certificate
Middle Name:	<input type="checkbox"/> Student Health Examination (HRS-H Form 3040)
Preferred Name:	<input type="checkbox"/> Florida Certificate of Immunization (HRS Form 680)
Date of Birth: <input type="checkbox"/> Male <input type="checkbox"/> Female	Grade Enrolling: <input type="checkbox"/> 6 th <input type="checkbox"/> 7 th <input type="checkbox"/> 8 th <input type="checkbox"/> 9 th <input type="checkbox"/> 10 th <input type="checkbox"/> 11 th <input type="checkbox"/> 12 th
Social Security Number:	
Current School:	
Applying for Grade:	

Ethnicity: ☐ Caucasian ☐ Hispanic ☐ African American ☐ Asian ☐ Other: _____

Primary Language Spoken at Home: _____

Family Information:

Father/Guardian	Mother/Guardian
Full Name:	Full Name:
Address:	Address:
City/State/Zip:	City/State/Zip:
Home Phone:	Home Phone:
Cellphone:	Cellphone:
Email:	Email:
Employer:	Employer:
Occupation:	Occupation:
Work Address:	Work Address:

City/State/Zip:	City/State/Zip:
Work Phone:	Work Phone:

Parents Marital Status: ☐ Married ☐ Divorced ☐ Separated ☐ Single ☐ Widow(er)

If divorced, do parents share custody? ☐ Yes ☐ No

Legal documentation is required to support custodial conditions, including who makes educational decisions, picking up student (s), etc.

Name of person responsible for school expenses & bill: _____

Family attends what church? _____

How did you hear about RCA? _____

Miscellaneous Student/Family Information

Other than you, who is authorized to pick up the student? Please list name, phone & relationship.

Name	Phone	Relationship

Name	Phone	Relationship

Name	Phone	Relationship

Name	Phone	Relationship

Student Educational Background Information

Last 2 school/daycare student attended:

Name: _____

Address: _____

Phone#: _____ **Fax:** _____

Dates Attended: _____ **Grade(s) Attended:** _____

Reason for leaving: _____

Name: _____

Address: _____

Phone#: _____ **Fax:** _____

For Christ and His kingdom, one child at a time.

Dates Attended: _____ **Grade(s) Attended:** _____

Reason for leaving: _____

Has the student ever been evaluated for learning difficulties, speech therapy, behavior adjustment, etc.?

☐ Yes ☐ No

Does the student have or had an IEP (Individual Education Plan)? ☐ Yes ☐ No **If yes, which grade?** _____

Has the student ever repeated or been held back in any grade? ☐ Yes ☐ No **If yes, which grade?** _____

Has the student been suspended, expelled or asked to withdraw from any school? ☐ Yes ☐ No

Explain: _____

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 Administration Representative: _____

Date: _____

For the Finance Office

Date Enrolled: _____

Initials: _____

Emergency Information

Student's name: _____ Gender: _____ Grade: _____

Address: _____

DOB: _____ Live with: ☐ Both Parents ☐ Mother ☐ Father ☐ Guardian(s)

In case of Emergency

Mother/Guardian: _____ Home Phone: _____ Cell phone: _____

Address: _____

Email address: _____ Mother's/Guardian's Employer: _____

Mother's/Guardian's Employer's Phone: _____ Ext. _____

Father/Guardian: _____ Home Phone: _____ Cell phone: _____

Address: _____

Email address: _____ Father's/Guardian's Employer: _____

Father's/Guardian's Employer's Phone: _____ Ext. _____

Authorized Contacts:

Name: _____, Phone: _____, Relationship: _____

Name: _____, Phone: _____, Relationship: _____

Name: _____, Phone: _____, Relationship: _____

Name: _____, Phone: _____, Relationship: _____

I/we hereby authorize Regency Christian academy the release of the student named above to the following persons in the event of illness, injury, evacuation or emergency that may occur while students are in school and/or school activities.

Parent/Guardian Signature: _____ Date: _____

For Christ and His kingdom, one child at a time.

Student Medical Information

Health Conditions/Allergies

Medications & Dosages

I hereby grant permission for the staff of Regency Christian Academy to contact the following medical personnel to obtain emergency medical care if warranted.

Student's Doctor's Name	Phone	Address
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Student's Dentist	Phone	Address
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Insurance Provider	Policy Holder	Policy Number	Group Number
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Preferred Hospital: _____

School Health Service Consent

Emergency Care Plan instructions Including symptom, medication, and notification in the event of an actual emergency (if applicable): _____

I, _____, the parent/legal guardian of _____, a minor, give authorization and consent to Regency Christian academy (RCA) to obtain emergency medical care and necessary transportation, X-Rays, anesthetics, medical or surgical diagnosis and emergency hospital, which is deemed advisable by and is to be rendered under the general or specific supervision of medical and emergency room staff. It is understood that effort shall be made to contact the undersigned prior to rendering treatment to the student, but that any of the above treatments will not be withheld if the undersigned or authorized adults cannot be reach.

Parent/Guardian Signature: _____ Date: _____

Student Name: _____ DOB _____ SS# _____

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.

Parent/Guardian Signature

Date

Witness

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.

Parent/Guardian Signature

Date

Witness

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.

Parent/Guardian Signature

Date

Witness

Date

STATEMENT OF DOCTRINAL BELIEFS

(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

For Christ and His kingdom, one child at a time.

Parent(s)/Guardian(s) Statement of Support

(Please initial)

____ 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.

____ 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.”

____ 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.

____ 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.

____ We will require our children to support spiritual activities of Regency Christian Academy (Chapel, Scripture memory, etc.).

____ 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.

____ We will be faithful to attend, to the best of our ability, all parent functions at Regency Christian Academy.

____ We will pay all our financial obligations to Regency Christian Academy on or before the due date. Mission statement

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

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

Partnering with RCA

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.

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 Regency Christians Academy's mission statement, goals and agree fully with the Parents/Guardians statement of support.

Parent/Guardian Signature

Date

Administrative Signature

Date

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 and 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 **2024-2025** school year.

I, _____, parent or official guardian of _____,
Print Name **Child's Name**

hereby grant permission to Regency Christian Academy, its employees or representatives, to take and use:

____ Photos/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

Parent Signature: _____ **Date:** _____

Regency Christian Academy Referral Program



and His kingdom, one child at a time.

Are you aware that RCA has a student referral program? Here is how the RCA Referral Program works:

- be a current RCA family
- refer a new family to RCA
- they enroll their child or children for the new academic school year **(2024-2025)**
- New student(s) start the new school year
- You will receive a referral credit of \$200.00 to your account (applied to September billing)



**Regency Christian
Academy**

11513 S. Orange Blossom
Trail, Orlando, FL 32837

407-851-7270
rcaschool.com

RCA Referral Credit

Date: _____

Referred Student: _____

Referred by: _____

Administrative Authorization: _____

*Redemption value \$200.00 Cannot be used on Registration Fee nor Testing Fee.
*No redeemable for cash.