



# ***Faith International Academy***

## **RETURNING STUDENT REGISTRATION**

School Year: \_\_\_\_\_

Student Name: \_\_\_\_\_ Entering Grade: \_\_\_\_\_

Child's Passport Number: \_\_\_\_\_ Country: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Child's Visa Number: \_\_\_\_\_ Visa Expiration Date: \_\_\_\_\_

*\*If you have a tourist visa, you must have additional immigration documentation. Please contact [executive.assist@fia.edu.ph](mailto:executive.assist@fia.edu.ph) for assistance.*

### **PLEASE ANSWER EACH QUESTION WITH “YES” OR “NO”.**

\_\_\_\_\_ Has your contact information (home or work) changed in the past year? (If yes, please write your new information in the space below.)

\_\_\_\_\_ Has your child received any new immunizations in the past school year? (If yes, please provide a photocopy of your child's immunization record.)

\_\_\_\_\_ Has your child developed any health problems, allergies, begun wearing glasses, or had any other changes in health status in the past year? (If yes, please explain below.)

\_\_\_\_\_ Do you have any other concerns that the school should be aware of? (If yes, please explain below.)

### **BILLING INFORMATION: Circle one choice from each category.**

**Frequency**

Yearly

Semi-annually

Quarterly

Monthly

**Tuition Paid By**

Parents

Mission

**Send Statement to**

Parents

Mission

Other (explain)

**Send Statement via**

Fax

E-Mail

Regular Mail

**SUPPORTING DOCUMENTATION:** Please enclose each of the following:

\_\_\_\_\_ Registration Fee (Please note that the registration cannot be honored unless accompanied by the registration fee payment)

\_\_\_\_\_ Your signature below indicates you have read and agree to the following Faith International Academy documents:

- Parent Release Information
- Statement of Faith & Unity
- Student Code of Conduct
- Child Safety Policy
- Computer Use Agreement\*
- Fee Schedule

\*Students in grades 6-12 will be asked to sign at the beginning of the school year.

\_\_\_\_\_ Medical Exam form, completed by a physician, for students entering **grade 6** and **grade 9**.

The information on this registration form is true and accurate. Both Parents please sign below.

\_\_\_\_\_  
Parent signature above printed name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent signature above printed name

\_\_\_\_\_  
Date