

For your convenience in meeting your financial obligations, tuition is divided into \_\_\_\_\_ installments. The first payment is due on or before \_\_\_\_\_; the final payment is due on \_\_\_\_\_, before the final Progress Reports are mailed at the end of the school year.

“I hereby pledge to pay my financial obligations to the school on the date due and understand that it may be necessary to withdraw my student if proper arrangements are not made on a past due account.”

“I give permission for my student to take part in all school activities, including sports and school-sponsored trips away from the school premises, and absolve the school from liability to me or my student because of any injury to my student at school or during any school activity.”

“I agree to uphold and support the high academic standard of the school by providing a place at home for my student to study and giving my student encouragement in the completion of any homework or assignments.”

“I appreciate the standards of the school and do not tolerate profanity, obscenity in word or action, dishonor to the Godhead and the Word of God, or disrespect to the personnel of the school. I hereby agree to support all regulations of the school in the applicant’s behalf and authorize this school to employ discipline as it deems wise and expedient for the training of my student.”

“I understand that the school reserves the right to dismiss any student who fails to comply with the established regulations and discipline or whose financial obligation remains unpaid.”

“I have read the *Student Handbook*, agreed to complete Parent Orientation PACEs, and understand the terms stated on this Application and agree thereto.”

\_\_\_\_\_  
*Signature of Father*

\_\_\_\_\_  
*Signature of Mother*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Date*



# AMBASSADOR



*Academy  
Application*

TERM 20 \_\_\_\_\_

# Student Information

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State \_\_\_\_\_

Phone \_\_\_\_\_

Age \_\_\_\_\_ Male  Female

Birth date \_\_\_\_\_

Birth place \_\_\_\_\_

Previous school \_\_\_\_\_

Previous school address  
\_\_\_\_\_

Last grade completed \_\_\_\_\_

# Family Information

Father's name \_\_\_\_\_

Employer \_\_\_\_\_

Position \_\_\_\_\_

Phone \_\_\_\_\_

Mother's name \_\_\_\_\_

Employer \_\_\_\_\_

Position \_\_\_\_\_

Phone \_\_\_\_\_

Married  Widow  Divorced  Separated

Non-applying children \_\_\_\_\_  
\_\_\_\_\_

# Religious Information

Church Attending \_\_\_\_\_

Address \_\_\_\_\_

Pastor \_\_\_\_\_

Phone \_\_\_\_\_

Has the student ever made a profession of faith in Jesus Christ?

Yes  No

# General Information

How did you hear about Ambassador?

\_\_\_\_\_

Why have you chosen Ambassador?

\_\_\_\_\_

\_\_\_\_\_

# Medical Information

Family physician \_\_\_\_\_

Allergies? \_\_\_\_\_

Phone \_\_\_\_\_

## Vaccinations

Polio?	Varicella?	MMR?	Hepatitis B?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Immunizations

DTP?	DTaP?	DT?	Td?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional Info

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

