



**FOLSOM
EDUCATIONAL
ACADEMY**
PreSchool, K - 8th

381 S Lexington Dr. Suite 100 Folsom, CA 95630

contactfea@feaschool.com

www.feaschool.com

(916) 790-8599



K-8th Registration Checklist 2025 - 2026 Academic Year

Registration applications with missing or incomplete requirements will be denied.

New Student Registration Requirements

- Application for Admission
- Student Emergency Information Form
- Parent/Student Handbook Form
- Financial Agreement
- Photo Consent Form
- Language Identification Form
- Copy of the child's Birth Certificate
- Copy of the child's previous school's academic and attendance records
- Copy of the child's CURRENT Immunization Card*
 - DTaP (5 doses, 4 OK if one given on or after 4th birthday)
 - Polio (4 doses, 3 OK if one given on or after 4th birthday)
 - Hepatitis B (3 doses)
 - MMR (2 doses, both given on or after 1st birthday)
 - Varicella (2 doses)
 - Tdap (1 dose, **only 7th grade and above**)

For KG Enrollments Only

- Report of Health Examination Form

REQUIRED PAYMENTS WITH SUBMISSION

- Non-refundable annual registration and materials fee**
- Post-dated tuition checks from August to May (10 full payments)
 - 10 monthly payments (equal amounts each check - dated 1st of each month)

OR

- 1 yearly payment (sum total of 10 months of tuition - dated August 1st)

*Subject to change by California Department of Public Health

** Refundable only in the event of lack of space



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Application for Admission 2025 - 2026 Academic Year

*Submit Post-Dated Tuition, Registration,
and Materials Fee with Application*

NEW Student Information (Please print clearly)

Enrolling Into Grade (CIRCLE ONE): **KG 1 2 3 4 5 6 7 8**

Student's last name: _____ First name: _____ Middle initial: _____

Birth date: _____ Age: _____ Male Female Ethnicity: _____

Place of birth: _____ State/Country of birth: _____

Home address: _____ City: _____ State: _____ Zip: _____

Special Services: No Yes If Yes, which program? Circle **ALL** that apply:

RSP Speech SDC ELL

Has student ever been tested for special services? No Yes

504 Plan Other: _____

Has student applied/attended FEA before?

Yes No

Do siblings attend FEA?

Yes No

NOTE: If student is not residing with both parents, proof of custody must be submitted at the time of registration.

Father (or guardian) Information:

Last name: _____ First name: _____ Middle Initial: _____

Address (if different from student's): _____ City: _____ State: _____ Zip: _____

Employer's name: _____ Occupation: _____

Employer's address: _____ Work phone: _____

Email: _____ Mobile phone: _____

Signature: ► _____ **Date:** ► _____

Mother (or guardian) Information:

Last name: _____ First name: _____ Middle Initial: _____

Address (if different from student's): _____ City: _____ State: _____ Zip: _____

Employers name: _____ Occupation: _____

Employers address: _____ Work phone: _____

Email: _____ Mobile phone: _____

Signature: ► _____ **Date:** ► _____



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Student Emergency Information

2025 - 2026 Academic Year

Student's last name: _____ First name: _____

Home phone: _____ Male Female Birth date: _____ Grade: _____

Home address: _____

_____ City: _____ State: _____ Zip: _____

Serious Health Condition or Allergies (please note) _____

In case of emergency, I authorize that my child be taken to the nearest medical center for treatment, if I am unavailable. I authorize FEA to obtain all emergency medical care prescribed by a physician. This care may be given under whatever conditions are necessary to preserve the life, limb or well-being of the child named above. Parents will be responsible for any emergency service charges.

Signature of Parent/Guardian

Date

EMERGENCY NUMBERS IN CASE OF NEED: In case of emergency, illness, or accident to the child named above, the school is authorized to proceed as indicated.

1. Contact Neighbor or Friend: Name: _____ Phone: _____
Address: _____
Cell phone or alternate number: _____

2. Contact Family Physician: Name: _____ Phone: _____
Address: _____
Cell phone or alternate number: _____

3. Other desired procedures/
Medical information _____

Emergency Authorization

IN THE EVENT OF AN EMERGENCY OR DISASTER I AUTHORIZE SCHOOL PERSONNEL TO RELEASE MY CHILD TO THE FOLLOWING INDIVIDUALS:

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

Signature of Parent/Guardian

Date



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Parent/Student Handbook Signature Form 2025 - 2026 Academic Year

I have read the **FEA Parent / Student Handbook** and understand all the rules and policies. I have explained these rules and policies to my children. I will follow all the rules and policies set forth in the Parent/Student Handbook and will impress upon my children to abide by them as well. I will also support our child's educational journey by attending school functions and parent conferences when requested.

Folsom Educational Academy holds the right to add, remove or edit any policies contained within the **FEA Parent / Student Handbook**. Policy changes will be communicated to parents and students.

Student Name:

Parents:

Print Name

Signature

Date

Print Name

Signature

Date



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Financial Agreement 2025 - 2026 Academic Year

Student's first name: _____ Last name: _____

K-8th Grade Timing and Rates (SELECT ONE):

- OPTION 1: 8:30 a.m. – 3: 30 p.m.** _____\$800 1st/Oldest Student _____ \$700 2nd Student_____ \$600 Additional Student
- OPTION 2: 8:30 a.m. – 5: 30 p.m.** _____\$950 1st/Oldest Student _____ \$850 2nd Student_____ \$750 Additional Student

Payments may be combined for multiple students to reduce number of checks. Post-dated checks MUST be dated the 1st of each month of school. *NOTE: Sibling discounts only apply to K-8 students. PK students shall not count as the '1st Student'.*

New Student Registration Fee (select one) _____ \$500 **before or on 03/14/25** _____ \$600 **after 03/14/25**

Materials and Book Fees (all students) _____ \$200

\$100 is refundable at the end of the year after 10 hours of volunteer service.

READ EACH ITEM BELOW CAREFULLY AND INITIAL ON THE LINE TO ACKNOWLEDGE

Basic Services Offered – Folsom Educational Academy offers a full-time elementary and middle school program for children of K - 8th grades. Children will receive quality education that nurtures the individuality and spirituality of every student in a safe and respectful environment.

_____ **Registration and Tuition** – Folsom Educational Academy is a non-profit organization and the budget is projected solely on the basis of the tuition, fees, and donations of the community. The parents agree to pay the Registration Fee, Materials and Book Fees, and Tuition as indicated above. Tuition fee in FULL is due on the 1st of each month. Monthly tuition is not pro-rated for partial-month attendance.

_____ **Pick-Up / Late Pick-Up Policies** – Students will be released only to individuals designated on emergency form. In case of early pick-up or appointments, office must be notified in advance. After one instance of late pick up, parents agree to pay a late fee of \$30 per late pick up if after 3:45 PM for Option 1 and after 5:30 PM for Option 2. Parents agree that late pick-up fee will be added to their account and it will be due on the 1st of the following month.

_____ **After School Fee** – After School Program (K-8) may be offered if there are more than 10 students enrolled at the start of the school year. If the After School Program is active, intermittent after-school care is offered. Students may enroll into After School within the school year. Students may not disenroll from After School (Option 2) once initially enrolled. No partial month after-school payments are accepted.

_____ **Returned Checks Fees** – a check is returned to FEA by the bank for any reason, your account will be charged a \$50 returned check fee to cover costs incurred to FEA.

_____ **Absences/School Closures** – Monthly tuition is due in full for each month, regardless of absences, mid-month enrollment, or school closures (please refer to School Calendar).

_____ **Other Fees** – There may be optional activities (school events, celebrations, field trips, etc.) throughout the school year that may require additional fees.

_____ **Withdrawal** – The enrollment to Folsom Educational Academy is an annual commitment (August - May). In the case where withdrawal before the end of the school year is necessary, a 30-day written notice is required. Any past due amount on your account must be paid in full before the 30-day notification period can begin. No refunds on partial months will be given. *Withdrawal after December (month 5) will result in forfeit of the tuition for the rest of the school year.*

_____ **Modification Conditions** – Folsom Educational Academy reserves the right to modify any of the conditions of this agreement. A 30 days prior notice will be given to the parent or guardian. In accordance with State Law, parents/ guardians must have all the required forms completed before attending Folsom Educational Academy. Please notify immediately if changes are made. FEA reserves the right to refuse service to anyone.

Please sign and return indicating that you have read, understood, and agree to all terms and conditions and financial obligations set forth by the Financial Agreement of Folsom Educational Academy.

Parent/Guardian Signature: _____ Date: _____

Print Name: _____



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Photo Consent 2025 - 2026 Academic Year

Student's first name: _____ Last name: _____ Birthdate: _____

FEA may utilize images/videos in public media coverage, posting of student images and names through FEA's digital communication tools and in the school yearbook.

Please read each section of the form carefully.

Public Media Withhold Form

FEA may allow news media on school campuses to interview, photograph, and videotape students for print and broadcast stories.

I ALLOW media representatives to publish/broadcast interviews with photos/video identifying my child.

I DO NOT want media representatives to publish/broadcast interviews with photos/video identifying my child.

Posting Student Name and Images on FEA Digital Communication Tools

FEA may publicize positive school events and accomplishments through digital communication tools including Facebook, Whatsapp, Instagram and other platforms. Parents have the choice to withhold their student's full name and images/videos from being posted. Public events like Fall Fair are not included in the opt-out.

I ALLOW my child's name/photos/videos posted on FEA digital communication tools.

I DO NOT want my child's name/photos/videos posted on FEA digital communication tools.

Yearbook

All students will be included in the yearbook, which will print full name, grade and photos of students.

Parent/Guardian Signature: _____ Date: _____

Print Parent/Guardian Name: _____