

**FILE NAME** \_\_\_\_\_  
*Last name of custodial parent*

**California Christian Academy, PSP  
 FIRST TIME ENROLLMENT Page 1**

Father's Name \_\_\_\_\_

Mother's Name \_\_\_\_\_

Or guardian or parent-approved teaching adult's name \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Teacher's Phone or Cell # \_\_\_\_\_

Primary Email \_\_\_\_\_ 2nd Email \_\_\_\_\_

CHILDREN BEING ENROLLED FIRST, LAST NAMES	Birthday MONTH /DAY /YEAR	Grade Level

**CCA MEMBERSHIP AGREEMENT**

As a member of **California Christian Academy, PSP**, (CCA), I agree to comply with the following as a condition of membership: I understand that once payment has been accepted, **member has 7 days to request a refund (minus a \$30.00 administrator fee). NO REFUNDS AFTER SEVEN DAYS.** I agree to maintain an active email I understand all communication and reporting is done electronically and it is my responsibility to inform administrator of any email change. I understand I **WILL BE NOTIFIED BY EMAIL REGARDING QUARTERLY ATTENDANCE** and failure to submit attendance may result in disenrollment from California Christian Academy, PSP or late fees. An active membership in HSLDA is required. I agree to maintain an active [Home School Legal Defense Association membership](#) and subsequent school years following. I understand I may use CCA school discount **#299708** when applying for HSLDA membership. I understand that **CCA PROVIDES ONLY** the following: record keeping, cum file storage, attendance tracking, annual affidavit filing and additional printing services where applicable. **All other services such as PROGRESS REPORTS, TRANSCRIPTS, DIPLOMAS, SCHOOL I.D. CARDS and CURRICULUM are paid additional services. (electronic initial here \_\_\_\_\_)**

I agree to oversee the homeschooling of my child(ren), (even if someone else is teaching my child(ren)). I agree to purchase required materials, appropriate curriculum at my own cost, and provide adequate lessons within the California Department Education [recommended branches of study](#). Course specifications at this link have been copied and pasted from the California Department of Education website. CCA welcomes children with special needs. Parent understands California Christian Academy, PSP **does not** provide SPECIAL NEEDS services or advice and suggest parents inquire with their local school district of residence to obtain these services. I understand I am to provide **annual earthquake and fire drill instruction as required by the CDE** for my children. SEE [EARTHQUAKE link](#). Here is a [curriculum link from the CCA Website](#), but parents may choose any curriculum source preferred. I have decision making authority regarding the education of my child(ren). **(electronic initial here \_\_\_\_\_)**

I authorize \_\_\_\_\_ to teach my child. This person's relationship to me: \_\_\_\_\_ (examples may be: a grandparent, aunt, close friend, etc.) **(electronic initial here \_\_\_\_\_)**

By signing this agreement, I acknowledge full understanding and agree to **QUARTERLY RECORD KEEPING** commitment shown in yellow box below ↓.

QUARTERLY ATTENDANCE	MUST BE SUBMITTED BY DATE TO AVOID LATE FEE	LATE FEE
JUL 1 THROUGH SEP 30	OCT 10	20.00
OCT 1 THROUGH DEC 31	JAN 10	20.00
JAN 1 THROUGH MAR 31	APR 10	20.00
APR 1 THROUGH JUN 30	JUL 10	20.00

Parent/Legal Guardian \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_  
*(print name here) (type digital signature here)*