



**Holy Martyrs Ferrahian High School**  
 Սրբոց Նահատակաց  
 Ֆերահեան Երկրորդական Վարժարան

**Holy Martyrs Marie Cabayan Elementary School**  
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 Մարի Գապայեան Նախակրթարան

**NEW STUDENT REGISTRATION APPLICATION**  
**2020 - 2021**

|   |  |  |
|---|--|--|
| First and Last Name _____   |  | <div style="border: 1px solid black; border-radius: 15px; padding: 10px; width: fit-content; margin: auto;"> <p><i>Click to insert/attach a most recent photo</i></p> </div>                             |
| Անունը Հայերենով: _____   |  |  |
| Date of Birth: _____  | Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female      |  |
| City of Birth: _____  | State and Country: _____   |  |
| Year Arrived in the U.S. _____  | Status: <input type="checkbox"/> Citizen <input type="checkbox"/> Resident |  |
| Home Address: _____   |  |  |
| Street  | City   | State      Zip Code  |
| California ID No. _____   |  |  |
| Student's Email Address: _____  |  | Cell Phone No. _____   |
| School Last Attended: _____   |  | Grade Level Completed: _____   |
| Has the student ever been expelled or suspended from a school the last three years? If yes, please explain  |  |  |
| Please provide the names of other siblings, the school they attend, and the grade level   |  |  |
| 1.  | Sibling Name _____   | School presently attending _____ Grade level _____   |
| 2.  | Sibling Name _____   | School presently attending _____ Grade level _____   |
| Communication conducted at home:<br><input type="checkbox"/> Primarily in Armenian language<br><input type="checkbox"/> Primarily in English language<br><input type="checkbox"/> Armenian/English<br><input type="checkbox"/> Other: _____ |  | Armenian dialect spoken at home:<br><input type="checkbox"/> Eastern Armenian – Armenia dialect<br><input type="checkbox"/> Eastern Armenian – Iran Dialect<br><input type="checkbox"/> Western Armenian |

|                                   |                     |
|-----------------------------------|---------------------|
| <b>Student referred by:</b> _____ | <b>Phone:</b> _____ |
|-----------------------------------|---------------------|

| <b>FOR SCHOOL USE ONLY</b>   |   |   |
|--|---|---|
| School Year: _____   | Entering grade level _____  | Today's date: _____   |
| <b>Registration fee:</b><br><input type="checkbox"/> \$575 Early (March 1- April 30)<br><input type="checkbox"/> \$600 Regular (May 1-May 31)<br><input type="checkbox"/> \$650 Late June (June 1- June 30)<br><input type="checkbox"/> \$700 Late July (July 1- Onward) | <b>Yearly Tuition:</b><br><input type="checkbox"/> One Child \$9200<br><input type="checkbox"/> Two Children \$8200<br><input type="checkbox"/> Three Children + \$7000 | <b>Technology Fee:</b><br><input type="checkbox"/> Technology Fee \$125 |



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| <u>Parent/Guardian One Info:</u>                      | <u>Parent/Guardian Two Info:</u> |
|---|----------------------------------|
| Name:   | Name:                            |
| Relationship:   | Relationship:                    |
| Occupation:   | Occupation:                      |
| Degree and Major:                                     | Degree and Major:                |
| Home Phone No.  | Home Phone No.                   |
| Work Phone No.  | Work Phone No.                   |
| Cell Phone No.  | Cell Phone No.                   |
| Email Address:  | Email Address:                   |
| High School Graduated From:                           | High School Graduated From:      |
| If divorced/separated the name of the legal guardian: |                                  |

**STATEMENTS**

**Terms of Probation**

All new students are on probationary status for the first three months upon enrollment. The school reserves the right to terminate a student's enrollment immediately if he/she fails to meet the academic and behavioral requirements of the school.

**Hold Harmless**

I agree to hold the school harmless of any liability resulting from injuries or loss of property caused by my child during any school activity or any school-sponsored function.

**Student/Parent Handbook**

I accept responsibility for accessing the Student/Parent Handbook by visiting the school's website ([www.Ferrahian.com](http://www.Ferrahian.com)) and reading its content fully with my child. I understand that the handbook contains information that my student and I may need during the school year. I understand that all students will adhere to the requirements, policies and procedures and be held accountable for their behavior. The school reserves the right to make revisions to the school's handbook when and if the Administration deems necessary.

**Compliance to Disciplinary Measures**

I understand that for safety and for educational purposes, the Administration may resort to disciplinary actions as outlined in the Rules and Regulations section of the school's General Handbook. The Administration has the right to periodically inspect the student's car, backpacks, school bags and lockers, and ask the students to empty their pockets, take off their shoes, and if necessary, confine the student temporarily.

**Compliance to Social Media Postings**

I understand that the school will post group photos or pictures of school activities on its website or on "Ferrahian News" page where my child's picture could appear. I have no objections to these postings.

| Parent/Guardian |      | Parent/Guardian |      |
|-----------------|------|-----------------|------|
| Signature       | Date | Signature       | Date |



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**MEDICAL/EMERGENCY DATA CARD**

|   |                |             |
|---|----------------|-------------|
| First and Last Name of Student:   |                |             |
| Are there medical conditions that the school should be aware of about your child? Yes <input type="checkbox"/> No <input type="checkbox"/>  |                |             |
| Medical condition 1:  | 2:             |             |
| Medication 1:   | 2:             |             |
| Allergy 1:  | 2:             |             |
| Family physician's name:  | Phone:         |             |
| Family physician address:   |                |             |
| Name of Insurance Carrier:  |                |             |
| Group Number :  | Policy Number: |             |
| <u>Medical Release Statement</u>  |                |             |
| In the event I cannot be reached, I consent to have emergency medical treatment given to my child by a registered nurse or a licensed physician. During such emergencies, I grant permission to the school to notify the following individuals about the health condition of my child.  |                |             |
| Name/Relationship:  | Phone:         |             |
| Name/Relationship:  | Phone:         |             |
| <u>Emergency Release Statement</u>  |                |             |
| At the discretion of the principal, in case of a major emergency such as earthquake, fire, security threats, etc., students who drive their own vehicle to school, may be asked to vacate the campus together with their sibling(s).<br>In the event of such emergencies, if I cannot be reached, the school may release my child to the following individuals: |                |             |
| Name/Relationship:  | Phone:         |             |
| Name/Relationship:  | Phone:         |             |
| Parent/Guardian One:  | Signature:     | Date:       |
| Cell Phone:   | Home Phone:    | Work Phone: |
| Parent/Guardian Two:  | Signature:     | Date:       |
| Cell Phone:   | Home Phone:    | Work Phone: |



**FINANCIAL RESPONSIBILITY AGREEMENT**

Students are enrolled full time for an academic year of ten months and the entire tuition is payable in ten equal installments, for the period August 16 to June 15. Parents are not exempt from their tuition obligations as a result of the student’s absenteeism from school due to sickness, truancy, suspension, extended class trips, other travel, or due to school closures for Christmas and Easter vacations, or for any other reason.

Tuition can be paid in cash, check, automatic withdrawal, or credit card. For credit/debit card payments, information must be provided to the school treasurer’s office (will incur a fee for each transaction). A service charge of \$25 will be assessed for checks returned for “not sufficient funds” or for credit card charges declined.

**Tuition Payment:**

Tuition installments are due on the 16<sup>th</sup> of every month beginning the month of August. For late payments the following apply:

**Past Due:** A student’s account is past due if the monthly tuition is not received five days after the due date. A monthly statement stamped “Past Due” will be issued to the parents as a reminder.

**Overdue:** A student’s account is overdue if the monthly tuition is not received one month after the due date. A monthly statement stamped “Over Due” together with a letter will be issued to the parents stating that the account is referred to the School Board for collection.

**Delinquent:** A student’s account is delinquent if the monthly tuition is not received two months after the due date. A monthly statement stamped “Delinquent” together with a letter issued to the parents stating that the student is placed on financial probation. During the financial probation, the school reserves the right to take any and all of the following actions to secure the unpaid tuition:

1. Require the parents to charge the balance on a credit card
2. Stop allowing the student financial privileges such as discounts and awards
3. Stop allowing the student from participating in the school’s extracurricular activities
4. Stop allowing the student from participating in the school’s long field trips
5. Stop allowing the student from participating in the school’s sports activities
6. In the absence of a satisfactory resolution, terminate the student’s enrollment as follows:
  - A student with an outstanding balance of two or more months at the end of the first semester will not be accepted to class the beginning of the second semester. Accordingly, the student’s name will be removed from the class roster.
  - A student with any balance will not be allowed to register for the next academic year.
7. Refer the account to a collection agency.

**Other Expenses:**

Textbooks, yearbooks, standardized test fees, uniforms, picture and photograph costs, locker fees, field trip and sports related fees, are the financial responsibility of the parents.

We, the undersigned, have read the Financial Responsibility Agreement and we state that we will assume our financial responsibilities toward the school.

|                 |      |                 |      |
|-----------------|------|-----------------|------|
| Parent/Guardian |      | Parent/Guardian |      |
| Signature       | Date | Signature       | Date |



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**REGISTRATION & TECHNOLOGY PAYMENT**

Student Name: \_\_\_\_\_ I.D. \_\_\_\_\_ Year of Graduation \_\_\_\_\_ Grade Level completed \_\_\_\_\_

Registration will be processed only if the student’s tuition account is current – no outstanding balance.

Technology Fee: \$125      Registration fee schedule:

|              |               |                  |                 |
|--------------|---------------|------------------|-----------------|
| \$575        | \$ 600        | \$650            | \$700           |
| April 1 - 30 | May1 – May 31 | June 1 – June 30 | July 1 & onward |

I acknowledge that the registration fee will include a **DIGITAL** copy of the yearbook. Parents will have the option to purchase a hardcopy.

Attached is my check for the registration and technology fee in the amount of \$ \_\_\_\_\_

Please charge the registration fee and technology fee of \$ \_\_\_\_\_ to my credit/debit card

- I understand that a 2% fee will be added to the registration fee for each credit/debit card transaction. After July 1, the fee will increase to 3%.

Credit/Debit Card No. \_\_\_\_\_ Expiration Date \_\_\_\_\_

Cardholder’s Name \_\_\_\_\_

Cardholder’s Signature \_\_\_\_\_ Date \_\_\_\_\_



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**Monthly Tuition Payment Authorization**

Student Name: \_\_\_\_\_ I.D. \_\_\_\_\_ Year of Graduation \_\_\_\_\_ Grade Level completed \_\_\_\_\_

Please charge the 2020-2021 monthly tuition to either my credit/debit card or automatically withdraw the tuition from my bank account on the 20<sup>th</sup> of every month for ten months as follows:

|           |              |                  |
|-----------|--------------|------------------|
| One Child | Two Children | Three + Children |
| \$920     | \$820        | \$700            |

- |   |   |
|---|---|
| <ul style="list-style-type: none"> <li>• August 20, 2020</li> <li>• September 20, 2020</li> <li>• October 20, 2020</li> <li>• November 20, 2020</li> <li>• December 20, 2020</li> </ul> | <ul style="list-style-type: none"> <li>• January 20, 2021</li> <li>• February 20, 2021</li> <li>• March 20, 2021</li> <li>• April 20, 2021</li> <li>• May 20, 2021</li> </ul> |
|---|---|

\_\_\_ Please charge the 2020-2021 monthly tuition to my CREDIT/DEBIT CARD:

CREDIT/DEBIT CARD No. \_\_\_\_\_ Expiration Date \_\_\_\_\_

Cardholder's Name \_\_\_\_\_

Cardholder's Signature \_\_\_\_\_ Date \_\_\_\_\_

The credit/debit card is valid (or will be updated) August 2020 through July 2021.

**There is a 3% fee for all credit/debit card transactions.**

\_\_\_ I will submit a monthly payment directly to the school.

\_\_\_ Please electronically withdraw the 2020-2021 monthly tuition from my bank account:

Account Holder's Name \_\_\_\_\_

Bank Name \_\_\_\_\_

Bank Routing No. \_\_\_\_\_

Account No. \_\_\_\_\_

Account Holder's Signature \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ **There are no fees associated with this transaction.**