



**Freedom Christian Academy**  
**505 Ward Ave**  
**PO Box 114**  
**Erskine, MN 56535**  
**Phone Number: (218) 687-3733**  
**Email: [fca@fcaerskine.org](mailto:fca@fcaerskine.org)**  
**Website: [fcaerskine.org](http://fcaerskine.org)**

We are an Inter-denominational Christian school giving children the opportunity to learn in an environment where their education is based upon strong, biblical values and concepts.

### **Student Application**

**Name of Child** *click here to fill in the name*

Last

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First

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Middle

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**Grade in which child will be enrolled** Pre-K K 1 2 3 4 5 6 7 8 9 10 11

Age of child now    Date of birth    /    /    Male / Female

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### **Family Information**

Father's Name:

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Mother's Name:

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Address:

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Address:

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Home Phone:

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Home Phone:

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Cell Phone:

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Cell Phone:

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Occupation:

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Occupation:

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Employer:

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Employer:

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Work Phone:

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Work Phone:

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Email:

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Email:

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Parents Marital Status: Married   Separated   Divorced   Widowed   Single

<b>Name of Sibling</b>	<b>Age</b>	<b>Grade</b>	<b>Where Enrolled</b>

**Academic Information**

Please list academic history, beginning with the school most recently attended.

<b>School</b>	<b>City</b>	<b>Years attended</b>

Has your child ever been dismissed from a school for behavior-related problems?

Yes/ No If yes, please explain:

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How did you learn about F.C.A? If you were referred to the school by an F.C.A family, please specify their name:

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### **Spiritual Information**

#### **Church Affiliation**

Is your child accustomed to Bible reading and prayer in the home? Yes / No

Give a brief statement regarding your child's personal relationship to Jesus Christ:

Why do you wish to enroll your child in F.C.A?

### **Medical Information**

Please list any physical or learning disabilities your child has:

Does your child take any medications regularly? Yes/ No If yes, please explain:

Does your child have any special medical needs? Yes/ No If yes, please explain:

**By signing this application, if my/our child is accepted for admission to F.C.A:**

- I/We agree to cheerfully abide by the rules of the school and to help advance its Christian testimony.
- We agree to pay all school bills by the first of each month, unless other arrangements have been made with the school treasurer.
- I/We understand that F.C.A. will not transfer my/our child's grades and records to a new school unless my/our tuition is paid in full.
- I/We understand that our signature(s) below apply(ies) to all statements on this application requiring my/our permission and testify that the information given is true and accurate.
- I/We along with my/our child agree to read and comply with the Student Handbook of F.C.A. Academy.
- The following information about my/our child may be important regarding consideration of his/her enrollment at F.C.A:

**Signature(s) of parent(s)**

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**Date**

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**Please return with a copy of immunization records or sign a waiver from our office.**

F.C.A does not discriminate in enrollment or in the provisions of its programs or services on the basis of gender, race, or national or ethnic origins.

Division of FHL Academy, INC



## **Freedom Christian Academy**

505 Ward Ave, Erskine, MN 56535

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### **Tuition rates for 2024-2025 school year.**

Christian financial stewardship is essential in order for FCA to operate successfully.

Children enrolled	9 Payment (begin in Sept.)	1 Annual Payment. (By Sept.1st)
1	\$456	\$4,100
2	\$856	\$7,700.
3	\$1145	\$10,300.
4	\$1378	\$12,400.
5	\$1612	\$14,500.

Tuition can be paid in full or on a 9 month plan begins on Sept. 1, 2023 and ends May 1st, 2024. For other payment plans, please call or make an appointment.

REMINDER: payments need to be made on lunch/breakfast accounts also. Lunch is \$3.50. Thank you.

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