



2101 Vista Parkway | Suite 4011 | West Palm Beach |
 Florida | 33411
 Toll Free: 1.800.890.6269 | Main: 561.537.5501
 Fax: 1.866.230.0259 | International Fax: 561.420.0909
 registrar@foresttrailacademy.com

If these required documents are not submitted within 7 days of enrollment, the student's account will be placed on hold/inactive status until receipt of all applicable documents. Please do not submit incomplete forms as they will not be accepted.

PARENT STUDENT HANDBOOK FORM

Dear Parents/Guardians or Independent Students:

Thank you in advance for reading the Parent Student Handbook. Our policies and procedures are detailed in the Handbook, and we are sure many of your questions and/or concerns are addressed here:

http://www.foresttrailacademy.com/pdfs/student_handbook_FTA.pdf

We want all of our students to have a successful experience at Forest Trail Academy. Please make sure both you and your child have reviewed our rules of conduct and internet safety, in addition to all other information.

If you have any questions not addressed here, please feel free to contact us. Please print and fax or e-mail this document with your signature below. We must have a copy for our files. We do not want any interruption in service and ask that upon reading the Parent/Student Handbook, that you scan/e-mail or fax this document back to our office for our records within 7 days of your enrollment.

As your child has just enrolled, if you have not faxed or e-mailed these forms, please do so <http://www.foresttrailacademy.com/enrollment-application.html>. We appreciate your understanding that the file has to be complete in order for your child to continue in our program. If you have any questions, please contact the school office, Monday – Friday, 9:00a.m. To 6:00 p.m. Our office number is 800-890-6269 or 561-537-5501.

Regards,

Dr. Gifty Chung

Dr. Gifty Chung

Director

Media Release (Parent Student Handbook - page 19):

I, the undersigned, DO grant permission for Forest Trail Academy to use the likeness or voice of my child and **first name and last initial only** for news releases, media, and promotional activities.

I, the undersigned DO NOT consent or grant full permission for Forest Trail Academy to use the name, likeness, or voice of my child for news releases, media, and promotional activities.

I have read and/or reviewed Forest Trail Academy's Parent Student Handbook. I understand that it is my/our responsibility to ensure that the student completes all submitted work himself or herself, with minimal assistance.										
STUDENT NAME										
STUDENT SIGNATURE	DATE	M	M	D	D	2	0	Y	Y	
PARENT / GUARDIAN NAME										
PARENT / GUARDIAN SIGNATURE	DATE	M	M	D	D	2	0	Y	Y	



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AUTHORIZATION FORM											
Please note that Forest Trail Academy offers the payment plan as a courtesy to parents/guardians who are unwilling or unable to pay tuition in full. If you choose to participate in this option, you are still responsible for the full tuition. Refunds are offered within 5 calendar days and do not include the \$150.00 non-refundable registration fee. If there is a third party paying on behalf of the student, we need a copy of their state ID, passport, or driver's license and they must sign this form.											
STUDENT NAME						GRADE LEVEL					

NAME ON CARD				CARD NUMBER					
CARD TYPE		VISA		AMEX		DISCOVER		MASTERCARD	
EXPIRATION DATE		M	M	2	0	Y	Y	CVV (SECURITY CODE)	
ADDRESS									
City			State			Zip Code		Country	
EMAIL ADDRESS									
OTHER PAYMENT OPTIONS		PAYPAL		TRANSACTION ID					
		CHECK		CHECK NUMBER					
		MONEY ORDER		MONEY ORDER NUMBER					
		BANK WIRE*		BANK WIRE DATE					
		Please note there is a \$25.00 bank wire fee that must be sent along with payment.*							

PROGRAM SEEKING											
ONLINE		Full Year		Semester		Individual Course(s)					
CORRESPONDENCE		Full Year									

PAY IN FULL												
PAYMENT AMOUNT		\$	PAYMENT DATE		M	M	D	D	2	0	Y	Y

PAYMENT PLAN												
Please note that Forest Trail Academy offers the payment plan as a courtesy to parents/guardians who are unwilling or unable to pay tuition in full. If you choose to participate in this option, you are still responsible for the full tuition. Refunds are offered within 5 calendar days and do not include the \$150.00 non-refundable registration fee.												
DOWN PAYMENT AMOUNT		\$	DOWN PAYMENT DATE		M	M	D	D	2	0	Y	Y
MONTHLY PAYMENT AMOUNT		\$	MONTHLY PAYMENT DAY		D	D						

I have read and agreed to the terms and conditions. I authorize the charges for education services rendered by Forest Trail Academy, LLC.													
CARDHOLDER'S NAME													
CARDHOLDER'S SIGNATURE				DATE		M	M	D	D	2	0	Y	Y

