



FAMILY CHRISTIAN ACADEMY

GRADUATION CEREMONY AND DIPLOMA ORDER FORM



A STUDENT INFORMATION					
Student First Name	Student Middle Name	Student Last Name	Date of Birth	Parent/Guardian Name	
Mailing Address		City	State	Zip	Contact Phone Number

B GRADUATION CEREMONY PARTICIPATION	COST	EXTENDED
Senior Graduation Ceremony <i>(Includes Ceremony, Diploma, Diploma Cover, Cap, Gown & Tassel)</i>	\$250.00	\$
Eighth Grade Ceremony <i>(Includes Ceremony, Diploma, Diploma Cover, Cap, Gown & Tassel)</i>	\$100.00	\$
Kindergarten Ceremony <i>(Includes Ceremony, Diploma, Diploma Cover, Cap, Gown & Tassel)</i>	\$100.00	\$

C GRADUATION ITEMS	COST	EXTENDED
Ceremony DVD <i>(Includes ceremony and memory movie)</i>	__X \$30.00	\$
Ceremony Photo Package: Large <i>(For the family or the graduate. Includes 1-8x10, 2-5x7's, 4-3x5's & 8 wallets)</i>	__X \$75.00	\$
Ceremony Photo Package: Small <i>(For the family or the graduate. Includes 2-5x7's and 4-3x5's)</i>	__X \$55.00	\$
Honors Cords <i>(Double=Stranded, twisted, two-colored cords with tassels at each end)</i>	__X \$15.00	\$
Senior Class T-Shirt: Circle Size : S M L XL 2X 3X <i>(Mailed after graduation)</i>	__X \$20.00	\$
Tassel Keepsake <i>(In addition to senior package if participating in graduation ceremony)</i>	__X \$15.00	\$
Diploma Cover <i>(In addition to senior package if participating in graduation ceremony)</i>	__X \$30.00	\$
Diploma: Issued Early (requires 1 week notice to process) <i>(Final grades must be submitted, requested diploma date must be provided)</i>	__X \$20.00	\$
Senior Consultation <i>(Required, call 615-847-3999 if you need to schedule yours)</i>	__X \$50.00	\$
Diploma: Official Copy for Current Graduates (No Charge for 1st Copy) <i>(Issued on 6/30 and 12/30, comes with 2 sealed transcripts)</i>	No Charge 1st Copy	\$ N/C

D ORDER DEADLINE - APRIL 1ST	COST	EXTENDED
Late Fee <i>(All graduation orders submitted after April 1st subject to a late fee)</i>	\$100.00	\$
Processing Fee		\$ 30.00
Graduation Fees Total		\$

E PAYMENT INFORMATION - Payment Plan	
Graduation Fees Total \$ _____ divided by 3 = \$ _____ monthly payment Choose Payment Schedule <input type="checkbox"/> February - April <input type="checkbox"/> March - May <input type="checkbox"/> April - June	I/We the parent/guardian of enrolled student give Family Christian Academy permission to automatically withdraw the amount listed for the monthly payment plan. The withdrawal will be processed on the first of each month from the checking account listed. I/We agree to attach a voided check to this order form. Parent/Guardian Signature _____ Date Signed _____ Name of Bank _____ City _____ State _____ Bank Transit Number _____ Account Number _____

F Prepay Information:			
<input type="checkbox"/> Cash/Check/Money Order <input type="checkbox"/> AmEx <input type="checkbox"/> Discover <input type="checkbox"/> Visa <input type="checkbox"/> Mastercard			
Name on Card	Telephone Number	Billing Zip Code	Signature
CARD NUMBER	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	EXP	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> CCV <input type="text"/>

G PARENT/GUARDIAN AGREEMENT
As parent or legal guardian, I permit mentioned students to participate in the Family Christian Academy Graduation Ceremonies and also to be part of its video production and graduation pictures. I have completed this form to the best of my knowledge and know and understand that no part of this application is refundable. I understand that I will not receive the graduation package until my balance is paid in full and that any errors on this application are my responsibility.
Parent/Guardian Signature _____ Date Signed _____

Requests may be delayed if any information on this form is incomplete. All fees subject to change without notice. No refunds.