



ANNOUNCEMENT OF 2026-2027 REGISTRATION AND TUITION



First Through Fifth Grades

First through fifth grade will again be offered for school year 2026-2027. We anticipate there will be a stand-alone first grade class, a stand-alone second grade class, a stand-alone third grade class, and a combined fourth / fifth grade class. ***Class composition is subject to change based on actual enrollment.***

The maximum enrollment for each class will be 15 students for a total capacity of 60 students. Enrollment specifics for 2026-2027 are further defined in the *Tuition 2026-2027 Section* on page 2.



REGISTRATION TIMELINE and FEES 2026-2027

December 10, 2025	The <i>Announcement of 2026-2027 Registration and Tuition</i> and the <i>Parent/Student Handbook for School year 2026-2027</i> will be sent home to current FCAE families.
December 11, 2025	The <i>Announcement of 2026-2027 Registration and Tuition</i> and the <i>Parent/Student Handbook for School year 2026-2027</i> will be sent home to families of FCA rising first graders.
December 16, 2025	Registration opens by paper and by website for FCAE families and for FCA rising first graders; \$225 non-refundable per child registration fee is required to secure 2026-2027 spot.
January 6, 2026	Registration opens by paper and by website for Berea Baptist families not yet at FCA or FCAE.
January 13, 2026	Registration opens to community-at-large by paper and by website .
April 30, 2026	Final tuition is set based on enrollment as of this date. See <i>Tuition 2026-2027</i> section for more details.



FCAE FINANCIAL UPDATE

In school year 2024-2025, as previously shared, FCAE experienced a significant financial shortfall of \$162,000, resulting from lower than projected enrollment. Thanks to a tremendous fundraising effort by our volunteer FCAE School Board, as blessed by the Lord, we continue to close the shortfall.

For the 2025-2026 school year, we raised tuition to avoid a repeat of the financial shortfall of 2024-2025. The School Board invested many hours of prayer, financial analysis, and creative thinking to devise a best practice approach in line with our Christian mission and principles. As a result, a tiered tuition schedule was developed. This schedule makes it possible for tuition to be **reduced** as enrollment growth occurs. The intention is to be forthright in our breakeven finances and to share the benefits of enrollment growth equally with all families.

The tiered tuition schedule will be continued into the 2026-2027 school year with no increase in the tuition rate. We know that increased enrollment is key to achieving the financial strength that is needed at FCAE. We also recognize that the tuition increase last year was significant and want to do our best to help our families adjust.



TUITION 2026-2027

Tuition will be set based on the tiered schedule shown below. This schedule is structured so that tuition will be **reduced** as enrollment growth occurs. *Enrollment as of April 30, 2026 will be used to establish the 2026-2027 tuition.*

Families will be notified of a tuition reduction when the enrollment milestone is met. In support of all FCAE families, we ask for your assistance in bringing new students to FCAE. The FCAE Director and FCAE School Board will also work diligently to promote FCAE in the community. Prayers are greatly appreciated.

2026-2027		
TOTAL ENROLLMENT for Grades First-Fifth	First through Fifth Tuition*	Per Month 12-month*
01 to 49 Students	\$ 6,345.00	\$ 528.75
50 to 60 Students	\$ 5,895.00	\$ 491.25
* enrollment as of 4/30/26	<i>payment schedule</i>	06/01/26 – 05/01/27

CONTINUING – We will once again offer a multiple-child discount for families enrolling more than one child. An academic year total discount of \$720 will be applied for each child a family enrolls in addition to their first child. This will apply as a \$60 discount per month for the 12-month plan or \$720 for the full-pay option.

CONTINUING – We will once again offer parents/caregivers the opportunity to earn a **FREE** month of tuition per family through our volunteer program. Please see the *Parent/Caregiver Volunteer Tuition Discount* for more details.

CONTINUING – We will once again offer tuition assistance for those who qualify based on need. To learn more about scholarship opportunities, please contact Director Gailey. We are happy to work with you within our ability to do so.



PAYMENT

Families enrolling their child(ren) agree to pay the full annual tuition and all associated fees for the school year. Parents should contact the school promptly if they anticipate difficulty making payments, as overdue accounts may result in temporary withdrawal until payments are brought up to date. Tuition and fees are generally non-refundable. Prorated refunds of tuition are only considered if a family must relocate out of the area for work—with one month's written notice and documentation—or if a physician recommends withdrawal due to a child's illness and provides written verification.

Tuition is due in **FULL** by June 1, 2026. To assist our families with their budgets, we are happy to instead bill tuition in **12 equal amounts** according to the schedule above. **Families will be automatically enrolled in the 12-month plan.** If full payment is preferred, please indicate this preference on the last page of the Registration form.

Payments are due on the **first day of each month** beginning with June 1, 2026 and ending May 1, 2027 monthly. A per child late fee of \$20 will be charged for each monthly payment not received by the due date. **Persons enrolling after June 1, 2026** will receive a first bill equal to the amount of all missed installment payments to that point and will then move forward under the remaining defined 12-month plan.

Payments are to be made by check or through Realm, the online payment system. If paying online, please select the dropdown option "FCAE Tuition." Checks should be made payable to FCAE. They may be dropped in the FCA drop box, hand-delivered, or mailed as indicated below.

CHECK PAYABLE AND MAILED TO: FCAE
ATTN: TUITION PAYMENT
PO BOX 280
Rockville, VA 23146

***NEW** – The previously offered 9-month payment plan is being discontinued, if you utilized this payment plan for the 2025-2026 school year and would like to discuss continuing that option, please reach out to our Finance Director, Tracy Cronin.

***NEW** – The previously offered 10-day grace period for monthly tuition payments is being discontinued. Payments made after the last day of the month will incur a late fee.



OTHER FEES, DISCOUNTS, and DETAILS

Registration Fee	\$225 non-refundable, per child registration fee due to secure enrollment spot; must be paid at time of registration
Returned Check Fee:	\$40
Monthly Late Fee:	\$20 per child; payment is due the last day of each month and is late on the first day of the following month
Staff Full-Time Employee Discount:	50% off each child's tuition; contact the Academy for openings
Sibling Discount:	See <i>Tuition 2025-2026 section</i>
Earned FREE Month of Tuition:	See <i>Parent/Caregiver Volunteer Tuition Discount Section</i>
Late Pick-Up Fee:	\$10 per 5 minutes late; at the Director's discretion
Remediation Session Fee:	\$40 per hour (Session required based on excessive tardies / absences.)

Parent/Caregiver Volunteer Tuition Discount

For 2026-2027, we are pleased to again offer an opportunity for our Academy families to earn one **FREE** month of tuition per family. With a contribution of 25 volunteer school hours to the Academy performed between 8/1/26 and 3/31/27, a family will receive a credit equal to their most expensive student's 12-month **monthly** tuition amount due 5/1/27. This credit will appear on their April bill due 5/1/27.

To calculate credit for volunteer hours that are less than the requested 25 hours, the family's most expensive student's 12-month tuition **monthly** amount will be divided by 25 to arrive at a per-hour credit amount. That amount will then be multiplied by the actual number of hours volunteered (less than 25) to arrive at the credit to appear on their bill due 5/1/27. Hours must be properly logged at the direction of the Academy Director. Background checks will be required for all volunteers as coordinated by the Academy Director. To provide an equal opportunity for all families to participate, tuition-credit volunteer hours will be capped at 25 hours per family. If a family chooses to pay in full at the start of the school year, any credits earned will be refunded in May 2027 before the close of the school year.

Waiting List

If the Lord should bless us with full capacity enrollment, a waiting list will be started. Families will be contacted in the order to which they were added to the list if openings should arise for the grade levels for which they are waiting.

Gratitude

We thank you for your prayers, patience, gifts, support, and family as we work to grow Faith Community Academy Elementary. The Lord has most definitely been with us and guided us every step of the way. We remain committed to boldly walking forward with steadfast faith in Him and His plan for FCAE throughout the 2026–2027 school year.

“Train up a child in the way he should go, even when he is old he will not depart from it.” – Proverbs 22:6

Giving to FCAE

Tuition alone does not cover the cost of a child's education at FCAE. The school is dependent upon a variety of other sources to help make up the difference. The giving of individuals and businesses is crucial to the school program. All gifts are tax-deductible and greatly appreciated. Please indicate your check as a donation. Donations can be made by check **payable to Berea Baptist with FCAE Donation on the "for" line.**

Mail donations to: Berea Baptist Church
ATTN: FCAE DONATIONS
PO BOX 280
Rockville, VA 23146



ENROLLMENT

See pages 6 through 14 for the application to register your child/children.

2026 - 2027

FAITH COMMUNITY ACADEMY ELEMENTARY



REGISTRATION

IMPORTANT

1. **Read** the (1.) *Announcement of 2026 – 2027 Registration and Tuition* and the (2.) *Parent/Student Handbook for School year 2026 - 2027*. **Sign below to indicate compliance.**
2. **Complete** Registration form; pages 6-14
3. **Both parents sign** pages 6, 13, and 14.
4. **Include** a check for all registration fees of **\$225 per child**.
5. **Return** completed Registration (pages 6-14) **AND** a check for **ALL registration fees payable to FCAE**. Mail to FCAE, PO BOX 280, Rockville, VA 23146.

I have read and understand the **Announcement of 2026 – 2027 Registration and Tuition** and the **Parent/Student Handbook for School year 2026 – 2027**, and I agree to comply with the policies and procedures set forth within.

Note: **BOTH** parents **MUST** sign this form and return it as part of the registration and enrollment process.

Parent Name Printed: _____

Parent Signature: _____ Date: _____

Parent Name Printed: _____

Parent Signature: _____ Date: _____



FCAE Registration Form 2026-2027

STUDENT INFORMATION

CHILD ONE

Last Name: _____ First Name: _____

Middle Name: _____ Preferred Name: _____

Date of Birth: _____ Gender: Male / Female Grade Requested: _____

Address: _____

City, State, Zip _____

CHILD TWO

Last Name: _____ First Name: _____

Middle Name: _____ Preferred Name: _____

Date of Birth: _____ Gender: Male / Female Grade Requested: _____

Address: ☐ same as above, or _____

City, State, Zip _____

CHILD THREE

Last Name: _____ First Name: _____

Middle Name: _____ Preferred Name: _____

Date of Birth: _____ Gender: Male / Female Grade Requested: _____

Address: ☐ same as above, or _____

City, State, Zip _____

CHILD FOUR

Last Name: _____ First Name: _____

Middle Name: _____ Preferred Name: _____

Date of Birth: _____ Gender: Male / Female Grade Requested: _____

Address: ☐ same as above, or _____

City, State, Zip _____

PARENT/ FAMILY INFORMATION

Mother's Name:

Mother's Cell # :

Mother's Full Address: ☐ same as above

Mother's Email:

Mother's Employer:

Mother's Work #:

Father's Name:

Father's Cell #:

Father's Full Address: <input type="checkbox"/> same as above	Father's Email:
Father's Employer:	Father's Work #:
Other Children in the Family NOT enrolled at Faith Christian Academy	
<u>Sisters</u>	<u>Brothers</u>
Name: _____ Age: _____	Name: _____ Age : _____
Name: _____ Age: _____	Name: _____ Age : _____
Name: _____ Age: _____	Name: _____ Age : _____
Is there any additional family information that would be useful for us to know in working with your child? (for example: grandparents in the home, sibling expected, recent relocation/move, etc.) Please attach additional pages if needed.	

How did you hear about FCA? (check all that apply)

Road Sign ____ Internet ____ Friend* ____ Church ____ Flyer ____ Other _____

*If FCAE was recommended to you, whom may we thank for the referral?

Home Church: _____

If you do not have a home church, are you looking for a home church? You are always welcome at Berea.

YES NO MAYBE

EMERGENCY CONTACT & PICK-UP INFORMATION		
Name: This person MAY / MAY NOT pick up my child.	Relationship:	Cell Phone: Other:
Name: This person MAY / MAY NOT pick up my child.	Relationship:	Cell Phone: Other:
Name: This person MAY / MAY NOT pick up my child.	Relationship:	Cell Phone: Other:
Name: This person MAY / MAY NOT pick up my child.	Relationship:	Cell Phone: Other:

MEDICAL INFORMATION

Child's Name _____

Allergies _____

Medications Taking _____

Additional Info/Concerns _____

Primary Care Physician's Name _____

Primary Care Physician's Number _____

Child's Name _____

Allergies _____

Medications Taking _____

Additional Info/Concerns _____

Primary Care Physician's Name ☐ same as above, or _____

Primary Care Physician's Number ☐ same as above, or _____

Child's Name _____

Allergies _____

Medications Taking _____

Additional Info/Concerns _____

Primary Care Physician's Name ☐ same as above, or _____

Primary Care Physician's Number ☐ same as above, or _____

Child's Name _____

Allergies _____

Medications Taking _____

Additional Info/Concerns _____

Primary Care Physician's Name ☐ same as above, or _____

Primary Care Physician's Number ☐ same as above, or _____

SCHOOL HISTORY

Child's Name _____

School Name, Years Attended 20__-20__, Reason for Leaving:

Child's Name _____

School Name, Years Attended 20__-20__, Reason for Leaving:

Child's Name _____

School Name, Years Attended 20__-20__, Reason for Leaving:

Child's Name _____

School Name, Years Attended 20__-20__, Reason for Leaving:

PHOTO/MEDIA AUTHORIZATION

At times, our staff may be taking photos/videos to promote the Academy. Pictures may be posted on our church website or on our social media accounts. No names will be associated with these photos on the internet. We appreciate your cooperation.

_____ I **give** permission for my child's (children) photo to be taken and used for such purposes.

_____ I **do not** give permission for my child's (children) photo to be taken and used for such purposes.

MUST BE SIGNED BY BOTH PARENTS

Print Name: _____ Signature: _____

Print Name: _____ Signature: _____

PARENTAL NOTIFICATION RELEASE AND CONSENT – to be signed by BOTH PARENTS

I do hereby release and hold harmless Berea Baptist Church and Faith Community Academy of any and all responsibility due to accident or injury incurred during any and all outings, field trips or events. (A separate parental consent form will be provided for all OFF-PREMISES activities).

I give permission for my child to receive any and all medical attention necessary in the event of any emergency accident, injury etc. under the direction of Berea Baptist Church or Faith Christian Academy, and/or the person(s) listed above as EMERGENCY CONTACTS, until such time as I may be contacted.

I also assume any financial responsibility for any such medical treatment.

MUST BE SIGNED BY BOTH PARENTS

Print Name: _____ Signature: _____

Print Name: _____ Signature: _____

NON-DISCRIMINATION POLICY

Faith Community Academy admits students of any race, color, or national or ethical origins to all the rights, privileges, programs, and activities made available to students at the Academy. It does not discriminate on the basis of race, sex, color, or national or ethnic origin in administering the school's educational policies, admission, and other school-administered programs.

FINANCIAL RESPONSIBILITY

I acknowledge that by signing this agreement, I am committing to pay the full amount of the annual tuition and all associated fees as outlined in the 2026-2027 Announcement of Registration and Tuition. I have reviewed and understand the financial obligations required for enrollment. I affirm that I am able to meet this full financial commitment.

If I experience difficulty meeting this obligation at any time, I agree to proactively contact the school with an explanation rather than waiting to be contacted. I understand that failure to make timely payments may result in the withdrawal of my child(ren) until the account is brought current.

I understand that registration fees are non-refundable with no exceptions. I also understand that no portion of the annual tuition is refundable upon withdrawal of my child(ren), except in the following circumstances:

- The family is transferred out of the area for work. One month's notice **MUST** be provided in writing along with documentation of the move/transfer. Tuition will be prorated at the discretion of the Director.
- The child requires medically necessary care, and withdrawal is recommended by a doctor. A note from the physician specifically indicating the necessity for withdrawal is **REQUIRED**. Tuition will be prorated at the discretion of the Director.

Responsible Financial Parties (Both Parents)

Print Name: _____

Signature: _____ Date: _____ Phone: _____

Print Name: _____

Signature: _____ Date: _____ Phone: _____

Complete

_____ Check Enclosed for **ALL \$225/per child** Registration Fees (Non-Refundable) Check # _____ Amount \$ _____

_____ Check here if **Full Pay 6/1/26 option requested** rather than 12-month payment plan