

# Carroll Academy

Excellence in Education

Barry Finnie, Headmaster

P.O. Box 226 • 909 College Street, Carrollton, MS 38917

Phone: 662-237-6858 • Fax: 662-237-9231

January 17, 2023

Dear Patrons,

Now is the time of year where we begin preparing for the next one. For our current families, we have set the dates for Early Registration, which begin on February 13<sup>th</sup> and will end at noon on February 24<sup>th</sup>. Regular registration times will be from 7:30am to 3:30pm each school day. We will extend time until 6:00pm on following days:

February 14<sup>th</sup> – 16<sup>th</sup>

February 21<sup>st</sup> – 23<sup>rd</sup>

Also, on Saturday, February 18<sup>th</sup>, the office will be open from 8:00am-11:00am.

Registration forms will be on the school's website. We will also have forms in the elementary and high school offices. We understand you may have limited time when you come in, so it would help if you will have your forms completed upon arrival.

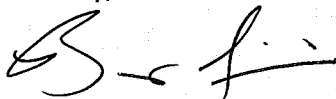
For students that will be in grades 7-11 next year, Mrs. Rogers will be meeting with them the first part of March for them to choose their classes. Only students that have registered for 2023-2024 will be allowed to meet with Mrs. Rogers.

We do have a couple of grades that are at capacity for the upcoming year. Keep in mind, the dates listed above are for our current Carroll Academy patrons only. Beginning on February 27<sup>th</sup>, registration will be open to new families. We have already had a couple of families inquire about CA. If your child is in a room that is at capacity and you have not registered, there could be a possibility of your child being put on a waiting list.

Please let us know if there is anything that we can do to help with the registration process.

Thank you for allowing Carroll Academy the privilege of educating your child.

Sincerely,



Barry Finnie  
Head of School

**CARROLL ACADEMY TUITION SCHEDULE 2023-2024**

| Tuition Amount Only                              |            |
|--|------------|
| 1 K-3 or K-4 Student All Day                     | \$3,900.00 |
| K-5 – 6 <sup>th</sup> Grade Student              | \$4,700.00 |
| 7 <sup>th</sup> – 12 <sup>th</sup> Grade Student | \$4,800.00 |

The above amounts do not include Book and Lab Fees and/or TPA Fees.

Early Registration is February 13<sup>th</sup> through February 24<sup>th</sup>.

|                                      |   |
|--------------------------------------|---|
| Early Registration Tuition Discounts | 1 - \$125, 2 - \$225, 3 - \$325, 4 - \$425, 5 - \$525 |
| Pay Tuition Balance in Full          | 3% Discount   |
| Multi Student Discounts              | 2 = 5%, 3 = 15%, 4 = 25%, 5 = 35%                     |
| Registration Fees:                   | 1 = \$250, 2 = \$390, 3 = \$530, 4 = \$670, 5 = \$810 |
| Building Fees:                       | \$100 per Family per year _____                       |
| Annual Book and Lab/Tech Fees:       | \$150 per child (K-3 - 12 <sup>th</sup> Grades) _____ |
| Annual TPA Fee:                      | \$150 per Family _____                                |
| Post Dated Check Fee:                | \$ 10.00 Annually                                     |

(Book, Lab and TPA Fees may be added to the total tuition due, with total figured into the monthly payments)

|                                   |       |
|-----------------------------------|-------|
| Registration Fee:                 | _____ |
| Appropriate Building & Check Fee: | _____ |
| Book, Lab/Tech, & TPA Fees        | _____ |
| If paid at Registration:          | _____ |

\_\_\_\_\_ Total due at Registration

**ALL FEES PAID AT REGISTRATION ARE NON-REFUNDABLE**

|                                   |       |
|-----------------------------------|-------|
| Add each Student's Tuition Amount | _____ |
|                                   | _____ |
|                                   | _____ |
| Subtotal                          | _____ |

**Academic Scholarship Incentives:**

Credit of ½ tuition will be awarded to those who have an ACT composite score equal to Or above.

|   |                        |
|---|------------------------|
| 11 <sup>th</sup> & 12 <sup>th</sup> Grade | 29 ACT Composite Score |
| 9 <sup>th</sup> & 10 <sup>th</sup> Grade  | 27 ACT Composite Score |
| 7 <sup>th</sup> & 8 <sup>th</sup> Grade   | 25 ACT Composite Score |

|                                    |       |
|------------------------------------|-------|
| Deduct Early Registration Discount | _____ |
| Subtotal                           | _____ |

Credit of ¼ tuition will be awarded to those Who have an ACT composite score equal to or above.

|   |                        |
|---|------------------------|
| 11 <sup>th</sup> & 12 <sup>th</sup> Grade | 28 ACT Composite Score |
| 9 <sup>th</sup> & 10 <sup>th</sup> Grade  | 26 ACT Composite Score |
| 7 <sup>th</sup> & 8 <sup>th</sup> Grade   | 22 ACT Composite Score |

|                               |       |
|-------------------------------|-------|
| Deduct Multi-Student Discount | _____ |
| Total Tuition Due             | _____ |

\*This policy is not retroactive.

|                              |       |
|------------------------------|-------|
| Book, Lab/Tech & TPA Fees    | _____ |
| If not paid at Registration: | _____ |

|                       |       |
|-----------------------|-------|
| Calculate Monthly Fee | _____ |
|-----------------------|-------|

(Divide Total Tuition Due by 10 for Plan \*1 or 12 for Plan \*\*2)

\*Plan 1 payments are July-May omitting February. \*\*Plan 2 payments are June-May.

**All Family Accounts MUST be current before registering for next year.**

**REGISTRATION INFORMATION 2023-2024**

K-3 K-4 K-5 1 2 3 4 5 6  
7 8 9 10 11 12 (please circle one)

Date: \_\_\_\_\_

**STUDENT INFORMATION**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ M/I \_\_\_\_\_ Goes By: \_\_\_\_\_

SSN: \_\_\_\_\_ Birthdate: \_\_\_/\_\_\_/\_\_\_ Age: \_\_\_\_\_ Race: \_\_\_\_\_ Sex: \_\_\_\_\_

School last attended: \_\_\_\_\_

Address: \_\_\_\_\_

**PARENT/GUARDIAN #1 INFORMATION**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ M/I \_\_\_\_\_ Goes By: \_\_\_\_\_

Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

City/State/Zip/County: \_\_\_\_\_ Lives with student: Yes No

Place of Employment: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_ Responsible for Tuition: Yes No

Misc. Info (cell phone, etc.) \_\_\_\_\_

Email Address: \_\_\_\_\_

**PARENT/GUARDIAN #2 INFORMATION**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ M/I \_\_\_\_\_ Goes By: \_\_\_\_\_

Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

City/State/Zip/County: \_\_\_\_\_ Lives with student: Yes No

Place of Employment: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_ Responsible for Tuition: Yes No

Misc. Info (cell phone, etc.) \_\_\_\_\_

Email Address: \_\_\_\_\_

**PERSON RESPONSIBLE FOR TUITION (if different than above)**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ M/I \_\_\_\_\_ Goes By: \_\_\_\_\_

Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

City/State/Zip/County: \_\_\_\_\_ Lives with student: Yes No

Place of Employment: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_ Responsible for Tuition: Yes No

Please list any siblings enrolled at Carroll Academy, along with their grade.

PLEASE ATTACH A COPY  
OF YOUR CHILD'S BIRTH  
CERTIFICATE AND ORIGINAL  
IMMUNIZATION FORM #121,  
Unless previously provided to  
Carroll Academy.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Student Information Form  
(2023-2024)**

1. Check all that apply to your child. If yes, explain.
2. Complete one sheet for each child you are interested in enrolling
3. Please be honest. This will help us best serve your child,

Child's name \_\_\_\_\_ Grade \_\_\_\_\_

Yes    No

\_\_\_\_\_    \_\_\_\_\_    Special Health Problems: \_\_\_\_\_

\_\_\_\_\_    \_\_\_\_\_    Allergies – Type: \_\_\_\_\_

\_\_\_\_\_    \_\_\_\_\_    Learning Problems: \_\_\_\_\_

\_\_\_\_\_    \_\_\_\_\_    Discipline Problems: \_\_\_\_\_

\_\_\_\_\_    \_\_\_\_\_    Has your child ever been expelled or suspended from another school?

School \_\_\_\_\_

Reason \_\_\_\_\_

\_\_\_\_\_    \_\_\_\_\_    Has your child ever repeated a grade in school?

Grade \_\_\_\_\_

Reason \_\_\_\_\_

Extracurricular activities your child desires to participate in:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Carroll Academy**  
**Web Release Form (2023-2024)**

Carroll Academy does have and maintain a Web Site ([www.carrollacademy.org](http://www.carrollacademy.org)). We are throughout the school year posting pictures of various school activities, honor rolls, educational material, and general information pertaining to the school, the faculty and students. It is a parent's option to authorize the school to use a student's picture and name on the said Web Site. **Carroll Academy does reserve the option to post group pictures, with no names attached to said Web Site.**

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I **DO NOT** authorize Carroll Academy to post a picture of my child, with name attached to the Carroll Academy Web Site. I do understand that Carroll Academy reserves the right to post group pictures, with no names attached to said Web Site.

\_\_\_\_\_  
Parent's Name

\_\_\_\_\_  
Student's Name

\_\_\_\_\_  
Student's Grade

\_\_\_\_\_  
Date

---

I **DO** authorize Carroll Academy to post a picture of my child, with name attached, to the Carroll Academy Web Site. I do understand that Carroll Academy reserves the right to post group pictures, with no names attached to said Web Site.

\_\_\_\_\_  
Parent's Name

\_\_\_\_\_  
Student's Name

\_\_\_\_\_  
Student's Grade

\_\_\_\_\_  
Date

Said forms will be kept in each student's permanent folder in the office for school records.

### Yearbook Order Form (2023-2024)

It is the policy of Carroll Academy that at registration each family pays for one Carroll Academy yearbook. This one book is included in your registration fees. This policy allows for one book per family, no matter how many children are listed on the school contract. The cost of a yearbook is \$70.00.

This year at registration, we are offering families the opportunity to purchase additional books for your child/children. The price for each additional book is \$70.00. Payments for additional books must be received at registration in order for your extra book/books to be ordered. Only the exact amount of extra books sold during registration will be ordered. There will be NO EXTRA books when they arrive.

If you are interested in purchasing extra Carroll Academy Rebel Yearbooks, please fill out the information below.

Thank you for your continued support.

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Student's Name

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Student's Grade (2023-2024 School Year)

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Parent's Signature

\_\_\_\_\_ Yes, I do want to order

\_\_\_\_\_ No, I don't want to order

\_\_\_\_\_ Number of Extra Books Ordered

\_\_\_\_\_ Money Paid

\_\_\_\_\_ Cash

\_\_\_\_\_ Check

\_\_\_\_\_ Check Number

**AUTHORIZATION AGREEMENT FOR AUTOMATED PAYMENTS 2023-2024**

**CARROLL ACADEMY**  
**P.O. BOX 226 - 909 COLLEGE STREET**  
**CARROLLTON, MS 38917**

Children:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I/We, \_\_\_\_\_, hereby authorize  
CARROLL ACADEMY, hereinafter called SCHOOL, to initiate debit entries to my/our  
\_\_\_\_\_ Checking Account OR \_\_\_\_\_ Savings Account indicated below and the DEPOSITORY  
named below, hereinafter called BANK, to debit same to such account for \$ \_\_\_\_\_  
(amount) for \_\_\_\_\_ number of months.

(PLEASE ATTACH A VOIDED CHECK BELOW)

BANK NAME: \_\_\_\_\_

BRANCH: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

TRANSIT/ABA#: \_\_\_\_\_

ACCOUNT#: \_\_\_\_\_

TERM DATE: \_\_\_\_\_

This authority is to remain in full force until noted period of time or SCHOOL and BANK has received written notification from me, or either of us, of its termination in such time and in such manner as to afford SCHOOL and BANK a reasonable opportunity to act on it.

SIGNATURE(S): \_\_\_\_\_

DATE: \_\_\_\_\_