



GLORY DAYS

— LEARNING ACADEMY —

Where Learning, Faith, and Excellence Grow Together.



STUDENT REGISTRATION PACKET

1. STUDENT INFORMATION

Student Name: _____

Date of Birth: ____/____/____ Age: ____

Gender:

Male Female Prefer not to answer

Home Address: _____

City: _____ State: _____ Zip: _____

2. PARENT/GUARDIAN INFORMATION

Parent/Guardian Name: _____

Relationship to Child: _____

Phone Number: _____

Email Address: _____

Preferred Method of Contact:

Phone Text Email

3. EMERGENCY CONTACT

Name: _____

Relationship: _____

Phone Number: _____

4. STUDENT INFORMATION

Current Grade: _____

Current School (if applicable): _____

Does your child have an IEP or 504 Plan?

Yes No

If yes, please explain:

★ OFFICE USE ONLY ★

Date Received: _____

Registration Fee Paid: Yes No

Play & Learn Live: Enrolled N/A

Online Preschool: Enrolled N/A

In-Home Tutoring: Enrolled Waitlist

Staff Initials: _____

Notes: _____

5. PROGRAM ENROLLMENT

Please select all programs you wish to enroll in:

Registration Fee – \$40.00
(One-time fee for new enrollments)

Play & Learn Live – \$40.00/month
Interactive live learning sessions that make learning fun and engaging!

Online Preschool – \$100.00/month
Faith-based online preschool with engaging lessons and activities.

In-Home Tutoring – \$100.00/month
Personalized one-on-one tutoring in the comfort of your home.

6. IN-HOME TUTORING DETAILS

In-Home Appointments Preferred:

Weekdays Weekends

Preferred Days:

Monday Tuesday Wednesday

Thursday Friday Saturday

Preferred Time:

Morning Afternoon Evening

Length of Each Session:

60 Minutes 90 Minutes 120 Minutes

Other Time or Special Requests: _____

**Appointments are based on availability. A minimum commitment of one (1) session per week is required.*

7. PHOTO & MEDIA PERMISSION

I give Glory Days Learning Academy permission to use my child's photograph or video for educational activities, newsletters, social media, and promotional materials.

Yes No

8. PARENT AGREEMENT

I certify that the information provided is accurate to the best of my knowledge. I understand that tuition, registration fees, and program fees are subject to the policies of Glory Days Learning Academy. I agree to comply with all academy policies and procedures.

Parent/Guardian Name: _____

Signature: _____ Date: ____/____/____

★ Thank You! ★