

Buddy System Application

FOR **CURRENT** FAMILY

\$500 (\$250 K4/K5) CREDIT PER STUDENT + \$500 (\$250 K4/K5) CREDIT PER STUDENT FOR NEW FAMILY

/	/		
TODAY'S DATE			

THIS FORM MUST BE SUBMITTED WITHIN 5 DAYS OF THE NEW STUDENT(S) ENROLLMENT DATE.

	This section should be completed by the family referring a student(s) to FRBA.						
Current Family	LAST NAME OF PERSON RESPONSIBLE FOR THE ACCOUNT		FIRST NAME	FIRST NAME			
	STREET ADDRESS		CITY	STATE	ZIP		
	*We wish to apply for the \$500 (\$250 for K4/K5) tuition credit offered for each student referred. A \$500 (\$250 for K4/K5) credit per student will be awarded in increments of \$50 (\$25 for K4/K5) per month, August through May.						
	SIGNATURE		_	DATE			
	☐ Approved by		Date /	/ Total Amount	Awarded \$		
	□ Declined by		Date/	/ Reason			
					_		
New Family	This section should be com	pleted by the nev	v family referred to	Front Range Ba	ptist Academy.		
	PARENT'S LAST NAME		FIRST NAME		MIDDLE INITIAL		
	STREET ADDRESS	CITY		STATE	ZIP CODE		
	*We wish to apply for the \$500 (\$250 for K4/K5) tuition credit offered for each student referred. A \$500 (\$250 for K4/K5) credit per student will be awarded in increments of \$50 (\$25 for K4/K5) per month, August through May.						
	We were referred to Front Range Baptist Academy by the family listed above and have enrolled the following students:						
	STUDENT NAME		GRADE	DAT	/ TE STARTED		
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	STUDENT NAME		GRADE	DAT	/ / TE STARTED		
	SIGNATURE			DAT	/ / / TE		