

Office Use Only	
Date	
Received By	

New Student - Waiting Pool Form

begin: August 2024 August 20	025 Other			
Student Name	Date of Birth		Gender M	F
Parent / Guardian Name Email		Phone		-
Parent Guardian Name Email		Phone		
Returning Family Y N Referred by (optional)		N If yes, v	vhich program?_	
Additional Info / Requests (optional)			_	
By signing below, I / we understan				
- This form will place my student in				
 If my student is accepted and en Tuition is due according to annually, updated tuition ra 	the tuition invoice date. 7	he Board of Dire	-	uition rates
• In the event that I / we une tuition is owed.	enroll our student less tha	n 30 days before	e their start date	, one month's
My signature below congabide by the guideling	firms that I agree to pay es and procedures in the requested student reco	e FMS Families	Handbook, an	•
Signature		Date		
 Signature		——— Date		