

**Fremont Christian School**  
**Application for Virtual Family Discount (VFD)**  
**2011-2012 School Year**

Name of Re-Registered Tuition Paying Parent \_\_\_\_\_

Email Address for Contact about VFD \_\_\_\_\_

Mailing Address \_\_\_\_\_

Name of Child \_\_\_\_\_ Grade for Fall 2011 \_\_\_\_\_

Name of Child \_\_\_\_\_ Grade for Fall 2011 \_\_\_\_\_

Name of New Parent \_\_\_\_\_

Email Address for Contact about VFD \_\_\_\_\_

Mailing Address \_\_\_\_\_

Name of First Child \_\_\_\_\_ Grade for Fall 2011 \_\_\_\_\_

Name of Second Child \_\_\_\_\_ Grade for Fall 2011 \_\_\_\_\_

When was the new family's student application submitted to FCS? \_\_\_\_\_

Name of Second New Parent \_\_\_\_\_

Email Address for Contact about VFD \_\_\_\_\_

Mailing Address \_\_\_\_\_

Name of Child \_\_\_\_\_ Grade for Fall 2011 \_\_\_\_\_

When was the new family's student application submitted to FCS? \_\_\_\_\_

Please contact Sue Jones at [sjones@fremontchristian.com](mailto:sjones@fremontchristian.com) or 510.744.2249 if you have questions. Please return this form to the FCS Business Office at 4760 Thornton Avenue Fremont, CA 94536.

Date Received: \_\_\_\_\_ Approval Communicated: \_\_\_\_\_