

12794 Forest Hill Blvd #14B. Wellington, FL 33411 * 561-784-1776 * info@gowca.org

2025-2026 Re-enrollment Application Letter

January 31, 2025

Dear WCA Families,

As the 2024-2025 academic year comes to an end, we want to express our heartfelt gratitude for your continued support and active involvement. Your partnership has been crucial in making this year a success, even in the face of challenges and disappointments we may have encountered.

At Wellington Collegiate Academy, our mission is to offer a high-quality education that instills traditional values, character development, and moral integrity in our students. This task, though daunting and sometimes challenging, is one we embrace wholeheartedly. We are committed to preparing our students for the future, and we deeply appreciate your partnership in this endeavor.

We are pleased to announce that re-enrollment for the 2025-2026 school year is now open. We have streamlined the process to make it easier for our current parents. Please indicate your re-enrollment decision by checking the appropriate box below and completing the form. The re-enrollment fee is \$195 if submitted by February 24, 2025, and \$225 if submitted thereafter. To ensure a smooth transition into the new academic year, the first monthly payment is due, with additional fees for materials and testing (if applicable) due by August 4th, 2025.

Re-enrollment Confirmation:

[] Yes, I confirm my child's re-enrollment for the 2025-2026 school year.

[] No, my child will not re-enroll for the 2025-2026 school year.

Families using Step Up for Students Scholarships are encouraged to renew their applications promptly to facilitate tuition adjustments.

Thank you for entrusting us with your children's education. We look forward to another fruitful school year and the continued privilege of serving your family.



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2025-2026 Re-enrollment Application Form

Today's Date: An		nticipated First Day of Attendance:		
Student's Name:				
First Name		Middle	Last Name	
Date of Birth			Grade for which this studen	t is applying
Gender: Male	☐ Female			
Permanent Home Add	dress:			
City:	State:	Zip Code:		Phone#:
Parents/Guardian Print:		Parents/Guardian Signature:		Date:

