



The Bridge Academy at Rocky River Church is a unique place devoted to learning and living Christian principles and helping equip our children and families for the future.

*“Children are a heritage of the Lord.”
Psalm 127:3*

The Bridge Academy offers early childhood education to children (1 to 5 years old) in a loving and safe environment through Biblically based teaching. Our teachers focus on the social, spiritual, emotional, physical and cognitive development of each child using developmentally appropriate practices and activities. Each class offers unique themes geared especially toward preschool children. Field trips and family interactive events offer opportunities for everyone to get involved! Our preschool is proud to include a wide variety of learning opportunities in addition to our daily academic and spiritual instruction. With the assistance of community volunteers and enrichment specialists, we offer:

- American Sign Language (ASL)
- Elementary Spanish
- Praise and Worship
- Cultural Awareness & Appreciation
- Community & Global Involvement
- Dental Health, Fire Prevention and Safety
- Operation Christmas Child Shoebox Drive
- St. Jude’s Trike-a-Thon

The Bridge Academy operates September through May, Monday through Friday from 9:00am to 1:00pm. All of our teachers are CPR and First Aid certified.

Tuition Rates for 2019/2020
\$50 Annual Registration Fee



| <u>Classes:</u> | <u>Time</u> | <u>Monthly Price</u> |
|-----------------|----------------------|----------------------|
| ALL | M-F | \$375.00 |
| ALL | 4 days (M-TH or T-F) | \$300.00 |
| ALL | 3 days (M/W/F) | \$235.00 |
| ALL | 2 days (T/TH) | \$155.00 |

Our 4s class must choose either the 4 or 5 day option.

The Bridge Academy at Rocky River Church
887 Pitts School Road SW
Concord, NC 28027
704-795-7625

www.RockyRiverChurch.com

Cynthia Phillips, Director

Jessica Russell, Assistant Director

TheBridge@RockyRiverChurch.com

(Please detach and return to the preschool or church.)

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The Bridge Academy Registration Form

Child’s Name _____

Class Room Age _____ 1s _____ 2s _____ 3s _____ 4s Date of Birth _____ Preferred name _____ Male () Female ()

Please circle which days per week? Monday Tuesday Wednesday Thursday Friday Allergies? Y/N

Name of Mother & Father (Guardian) _____

Address _____
Street #/Apt. # _____ City _____ State _____ Zip Code _____

Mother’s Cell Phone _____ Father’s Cell Phone _____

Email Address _____