



# Eastern Hills

CHRISTIAN ACADEMY

3100 Morris Street NE  
Albuquerque, NM 87111

Phone: 505-294-3373  
[www.easternhillschristianacademy.org](http://www.easternhillschristianacademy.org)

## **NEW STUDENT REFERRAL PROGRAM**

The EHCA Referral Program is to thank our families for their support and promotion of our school. For the 2018-2019 school year this program begins August 13, 2018 and ends January 7th, 2019. We recognize the value of word of mouth recommendations for our school and know that the word of a satisfied EHCA family is worth more than any billboard or radio advertisement.

### **What is the program?**

EHCA will give a tuition credit of \$300 for referrals of new families to our school. Only one \$300 credit will be given for each new family that enrolls, regardless of the number of new students in that family. The referral payment will be credited to the referring family upon the new student's payment of registration fees and first month's tuition, and completion of first month's attendance.

### **Who qualifies as a referral?**

- NEW students of new families. This does not include younger siblings of current or past students, or students returning to EHCA
- New students who have been accepted and paid registration fees, paid at least first month's tuition, and have completed first month's attendance

### **Who can receive the benefit from this program?**

Currently enrolled EHCA families (including grandparents) and school employees

### **How do I access this credit?**

- In order for the referring family to receive the credit the NEW family must include the referring family's name on the (How did you hear about our school?) line on the application, and/or the Student Referral Form

### **Is there a limit to the number of students a family can refer?**

There is NO LIMIT to how many times a family can use the student referral program within the promotion period

### **What about students referred mid-year?**

For new students who register after September based on a referral, the referring family will receive a prorated credit based on the percentage of the school year the new student will be attending



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## Referral Form for New Students

Referring Family: \_\_\_\_\_  
Last Name First

Phone Cell Phone Email

New Family: \_\_\_\_\_  
Last Name First

Phone Cell Phone Email

Address City ST Zip

### New Students:

Last Name First Grade (when enrolling)

Last Name First Grade (when enrolling)

Last Name First Grade (when enrolling)

### OFFICE USE ONLY:

Date of Enrollment of new student: \_\_\_\_\_

\_\_\_\_\_  
Administrator's Signature

Date of 1st month tuition payment or payment in full: \_\_\_\_\_

Date referral payment paid out: \_\_\_\_\_

\_\_\_\_\_  
Bookkeeper's Signature