

I. Family Information

Our family is seeking re-registration for the 2017-2018 school year for the following student(s):

Parents _____
Student _____ for grade: _____
Student _____ for grade: _____
Student _____ for grade: _____
Student _____ for grade: _____

Address _____
City, State, Zip

Phone: _____ Email: _____

Fees enclosed: \$75.00 per student if paid by April 19, 2017
\$135.00 per student if paid on or after April 20, 2017
X _____ = _____
Number of students Total amount enclosed

We are required by the State of Ohio to ask for the following optional information:

Place of birth: USA _____ Outside of US _____ What country? _____

Race/ethnic composition of each student enrolled. Please check the appropriate category.

Black _____ White _____ Hispanic _____ Asian _____ Pacific Islander _____ American Indian/Alaskan Native _____

II. Church Attendance Verification

Our family attends: _____ Phone: _____

Address City, State, Zip

Please check all boxes that apply:

[] We are members in good standing [] We regularly attend the services of our church
Specify: [] Sunday AM [] Sunday PM [] Mid-Week [] Bible Study

Pastor's Name: _____

Pastor's Signature: _____ Date _____

Pastor's Phone (if different than church) _____

Pastor's comments (if any) _____

III. Financial Agreement

Please indicate your intentions for tuition payments for the 2017-2018 school year (mark all that apply):

- I will pay my tuition in full before the start of the school year. (Tuition paid in full by Aug. 1st qualifies for FREE Book & Technology Fees)
 - I have a current FACTS account that I wish to cancel
 - I will be using the same account set up as last year.
 - STOP! I want to take advantage of 40% off Book & Technology Fees by moving my FACTS start date to July. Please change my current FACTS agreement to begin July 5th _____ or July 20th _____ (choose one).
 - STOP! I will have new banking information. Please call me at _____ to discuss options.
 - STOP! I would like to add or delete the Peace of Mind death benefit for my account.
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IV. Release of Information

I understand and acknowledge that from time to time, BCA may publish student photographs or images in various school publications. Publications in which my child's photograph or image may appear include, but are not necessarily limited to, the yearbook, school brochures, video recordings, the school newspaper and BCAs website.

I understand that unless I request in writing that I do not want such information released, BCA may publish photographs or images of my child that do not identify my child without my consent. I further understand that in order for BCA to publish a photograph or image of my child with identifying information, I must give my written consent (with the exception of the BCA yearbook - additional consent will not be sought in this instance).

Please note that BCA has no control over photographs or images published by non-school entities.

Signature of Parent/Guardian _____ Date _____

V. Parent's Agreement

We have read the **BCS Parent-Student Handbook** and agree to comply with the policies set forth for the 2017-2018 school year.

Signature of Parent/Guardian _____ Date _____

Bethlehem Christian Academy recruits and admits students of any race, color or ethnic origin to all its rights, privileges, programs and activities. In addition, the school will not discriminate on the basis of race, color or ethnic origin in the administration of its educational programs and athletics/extracurricular activities. Furthermore, the school is not intended to be an alternative to court or administrative agency ordered, or public school district initiated desegregation.

Bethlehem Christian Academy will not discriminate on the basis of race, color, or ethnic origin in the hiring of its certified or non-certified personnel.