Bethel Baptist Christian School Contract 2024 - 20253 1004 Yorktown Road Yorktown, VA 23693 Office (757)867-6216 Fax (757)867-7254

Child's Name: Phone: Date of Birth: Month _____ Day ____ Year ____ Male 🗆 Female 🗖 Mother's Name: Father's Name: **Attention Parents:** Please read this form carefully before signing. No exceptions will be made to the policies on this Contract. FEES DUE AT REGISTRATION Initials I/we understand that at registration I am paying four fees. 1. A **Registration Fee** that includes office processing. 2. A Curriculum/Supply Fee that includes the following: all books and testing materials required for my child, school supplies for daily activities, a field trip and yearbook. 3. A Reservation of Space/LMT Fee: The reservation fee holds my child's spot in a school class. This fee is NONREFUNDABLE under any circumstances. This fee will be applied to your child's Last Month's Tuition (LMT). WITHDRAWAL BEFORE AUGUST 15TH I/we understand that NO fees are refundable after August 15, 2024. These fees will be used as the 30-day notice for withdrawal (see handbook). I/we understand the following policies for reimbursement before August 15, 2024: 1. Registration Fee and 1/2of the Curriculum/Supply Fee are refundable with written notice before (postmarked or in office) August 15, 2024. 2. Reservation of Space/LMT Fee is NONREFUNDABLE under any circumstances. PLEASE BE ADVISED: We cannot make allowances for changes in military orders, relocation, or family circumstances. FINANCIAL AGREEMENT **Initials** I/we hereby understand, accept, and agree to the tuition amount agreed upon at registration by the first school day of each month starting in September as long as my child is enrolled. I understand that a late payment of \$20 will be assessed after the due date. Each month's tuition is the same amount from September until May, regardless of holiday breaks and/or absences. WITHDRAWAL DURING SCHOOL YEAR _____ Initials I/we understand that any withdrawal during the school year from Bethel Baptist Christian School must be given in writing at least 1 month in advance. Reservation of Space/LMT Fee paid at registration will be used as tuition between my withdrawal statement and withdrawal date. PHOTOS Initials I/we understand that candid photos of my child will be taken throughout the year. Please respect the privacy of all our students and families by not posting pictures of students, other than your own, on any form of social media. BBCS will respect your privacy and will not post pictures on nonsecure websites without parent's authorization. **EMAIL** I/we understand that email is one of our primary forms of communication. Email addresses will be included in the classroom distribution list. **DIRECTORY** YES or NO, please include my information in the Bethel Baptist Christian School Classroom Directory. ***BBCS will distribute directory information for each class. It is to be used only for contact information purposes by other Bethel Baptist Christian School families (carpools, play dates, etc.). I/WE HAVE REVIEWED ALL TERMS AND CONDITIONS IN THIS CONTRACT & PARENT HANDBOOK AND UNDERSTAND AND ACCEPT ALL TERMS AND CONDITIONS HEREIN. Handbook Website: www.bbcsyorktown.org Password: BBCS24-25 I/WE AGREE TO ESTABLISH A POSITIVE AND CONSTRUCTIVE RELATIONSHIP WITH BETHEL BAPTIST CHRISTIAN SCHOOL. Parent Signature: Office use only **FEES due at Registration** Age /Grade Received by :______Date:_____ Birth Certificate #:_____ Registration fee State: Curriculum/Supply Fee Verified by: Reservation of Space/LMT

Total.

Check #

Amount

**Mandatory to fill out Highlighted items