

# Barren Creek Christian Academy

25845 Ocean Gateway  
Mardela Springs, MD 21837  
410-572-2800 (Church)  
410-341-0023 (School)

## Enrollment Form 2009-2010

Child's Name \_\_\_\_\_  
(Last) (First) (Middle) (Goes By)

Birth Date: \_\_\_\_\_ Grade Entering: \_\_\_\_\_ Male \_\_\_ Female \_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

\*Home Telephone: \_\_\_\_\_ \*Email: \_\_\_\_\_

Other Contact Numbers (Wireless, Pager, Etc.) \_\_\_\_\_

I do \_\_\_/do not \_\_\_ wish to have my phone number given out.

I do \_\_\_/do not \_\_\_ wish to receive school correspondence by e-mail.

Father's Name: \_\_\_\_\_ Mother's Name: \_\_\_\_\_  
(Male Guardian) (Female Guardian)

Employment: \_\_\_\_\_ Employment: \_\_\_\_\_

Work Telephone: \_\_\_\_\_ Work Telephone: \_\_\_\_\_

Who does the child live with? Both Parents \_\_\_ Mother \_\_\_ Father \_\_\_ \*Shared Custody \_\_\_

Grandparent \_\_\_ Guardian \_\_\_ Other \_\_\_\_\_

For Shared Custody please note details below:  
\_\_\_\_\_  
\_\_\_\_\_

Name of Non-parental Guardian (s) (if applicable) \_\_\_\_\_

Emergency Name & Telephone #: \_\_\_\_\_

Emergency Name & Telephone #: \_\_\_\_\_

Religious Affiliation/Membership: \_\_\_\_\_

Allergies/Disabilities: \_\_\_\_\_

Child's Physician/Telephone #: \_\_\_\_\_

Referred By: \_\_\_\_\_

Please give two references:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

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**I would be interested in bus/van service for my child if available. YES \_\_\_\_\_ NO \_\_\_\_\_**

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1. A \$50.00 enrollment fee must accompany this form for each child registered (Maximum \$75.00 per family).
  2. The enrollment deposit will be non-refundable (unless application denied by school).
  3. Please notify the office immediately if any of the above information changes during the year.
  4. I/We have read the school handbook and agree with all of the rules and regulations of Barren Creek Christian Academy. This can viewed at [www.barrencreekchristianacademy.org](http://www.barrencreekchristianacademy.org). If you need a hard copy you may request one by calling the church or school.
  5. Tuition will be \$3,300.00 per year. It may be paid in installments of 12 @ \$277.00 per month, or 10 @ \$332.00 per month. The first installment is due by August 14, 2009.  
Note: 10% Discount is given when a family has two or more students enrolled, including the first child  
5% Discount is given when tuition is paid in full by August 17<sup>th</sup> 2009
  6. Transportation charges will be \$30.00 per week for each child, if needed. There is limited availability. Fee may be altered to accommodate for fuel price increases.
  7. Each newly enrolled student will be required to take a mandatory placement test to help determine if remedial work is needed. Test dates will be as scheduled. There is a non-refundable testing fee of \$20.00 for each student. Testing is not required by current students.
  8. Curriculum fees: Grades K – 6 - \$250.00  
Grades 7 – 12 - \$300.00
- Book fee is due at time of enrollment.

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Date Enrolled: \_\_\_\_\_ Amount Paid: \_\_\_\_\_

Parents' Signature: \_\_\_\_\_ Parent's Signature: \_\_\_\_\_

Acceptance by School:

School Board: \_\_\_\_\_ Teacher: \_\_\_\_\_

Records Transfer: \_\_\_\_ Immunization Records: \_\_\_\_ Medicine Authorization: \_\_\_\_\_ Physicians Auth.:

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\_\_\_\_\_  
(Date)

I, \_\_\_\_\_ authorize Barren Creek Christian Academy  
(Name of Parent/Guardian)

to obtain all school records from \_\_\_\_\_  
(Name of Previous School)

\_\_\_\_\_  
(Address of School) (Phone of School)

For \_\_\_\_\_  
(Name and Grade of Student)

I understand that all records are confidential and for official school use only.

\_\_\_\_\_  
(Signature of Parent)

\_\_\_\_\_  
(Signature of School Official)