



**MEDICAL INFORMATION**

Family Physician: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Does student have any physical defects or allergies? \_\_\_\_\_  
Explain: \_\_\_\_\_  
List any medications student is currently taking: \_\_\_\_\_  
\_\_\_\_\_

**SCHOLASTIC INFORMATION**

Has student ever been expelled, dismissed, suspended, or refused admission to another school? \_\_\_\_\_ If yes, explain: \_\_\_\_\_  
\_\_\_\_\_  
Has student ever had disciplinary difficulty at school? \_\_\_\_\_  
If yes, explain: \_\_\_\_\_  
Does student have a juvenile or arrest record? \_\_\_\_\_  
If yes, explain: \_\_\_\_\_  
Has student ever used tobacco or nonprescription drugs of any kind? \_\_\_\_\_  
If yes, explain: \_\_\_\_\_  
Please indicate academic level of student's previous work:  
Excellent \_\_\_\_\_ Good \_\_\_\_\_ Average \_\_\_\_\_ Poor \_\_\_\_\_  
Has student ever failed an academic subject in school? \_\_\_\_\_  
If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

**GENERAL INFORMATION**

How did you hear about this school? \_\_\_\_\_  
\_\_\_\_\_  
Why have you chosen to home school through Berean Christian School?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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Application must be filled out completely before it can be processed.  
Registration Fee of \$75.00 must accompany Application and is non-refundable.  
An interview with the parents and the student will be required before final acceptance.

**CONSENT FORM**  
(One form per student)

**CHILD'S NAME:** \_\_\_\_\_  
*(First and Last Name)*

**Child's Date of Birth:** \_\_\_\_\_

**TRIPS AND EXCURSIONS**

I authorize Berean Christian School to take my child on school-sponsored trips and special excursions away from the school premises. I also authorize the child to ride as a passenger in the vehicles owned or leased by Edgemont Bible Church/Berean Christian School. I understand all such trips are under the supervision of Berean Christian School and that the health and safety precautions are taken in compliance with normal child care standards.

**EMERGENCY MEDICAL CARE**

I authorize Edgemont Bible Church/Berean Christian School to secure emergency medical care for my child when I cannot be immediately reached at the time of emergency. I will be responsible for the emergency medical charges upon receipt of the statement.  
Preferred doctor/clinic/hospital: \_\_\_\_\_

**PHONE NUMBERS FOR BCS TO CONTACT IN CASE OF A CONCERN OR EMERGENCY WHILE AWAY FROM THE SCHOOL PREMISES**

**(Complete any that apply):**

Father: \_\_\_\_\_  
Mother: \_\_\_\_\_  
Other (Name/Phone #): \_\_\_\_\_

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

\_\_\_\_\_  
*(Signature of Father)*

\_\_\_\_\_  
*(Signature of Mother)*

# Berean Christian Satellite School Agreement

As a Satellite School of Berean Christian School, our home school agrees:

- 1) To provide a safe environment in which my child(ren) can learn.
- 2) To provide a minimum of 176 days of instruction per school year.
- 3) To have a minimum of 5 hours of instruction per day.
- 4) That this instruction shall include of study of the Holy Scriptures, good citizenship, health, representative government, music, art, and physical education as well as Mathematics, English, Social Studies, Science, Word Building, Communication Skills, and Language Arts.
- 5) To keep accurate attendance and academic records.
- 6) That the academic records will be brought to Berean Christian School at the end of each quarter.
- 7) To be tested by Berean Christian School with the Stanford Achievement Test at the designated time each school year.
- 8) That our academic performance will be equivalent to the standards of Berean Christian School.
- 9) To follow the *BCS Satellite Handbook's* current guidelines for graduation upon my child's entry into high school curriculum.
- 10) That all materials purchased through Berean Christian School shall be paid for in full upon receipt.
- 11) That in all events and activities in which our child is involved in with Berean Christian School (i.e. testing, field trips, etc.) we will abide by the equivalent of Berean's guidelines for dress and personal appearance.

**Tuition Payment Options:**

- \_\_\_\_\_ Option 1 — Single Payment of \$\_\_\_\_\_ due on or before August 1st.  
(Paid directly to the school)
- \_\_\_\_\_ Option 2 — Dual Payments. First payment of \$\_\_\_\_\_ due by August 1st.  
Second payment of \$\_\_\_\_\_ due by December 31st.  
(Both paid directly to the school)
- \_\_\_\_\_ Option 3 — Ten (10) automatic monthly payments through the FACTS Payment Plan. Option of payments on the 5th or 20th of the month. Payments on the 5th will begin August 5th and end May 5th; Payments on the 20th will begin July 20th and end April 20th.
- \_\_\_\_\_ Option 4 — Twelve (12) automatic monthly payments through the FACTS Payment Plan. Option of payments on the 5th or 20th of the month. Payments on the 5th will begin June 5th and end May 5th; Payments on the 20th will begin May 20th and end April 20th.

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**Financial Support:** "I hereby pledge to pay my financial obligations to the school on the date due and understand that it may be necessary to withdraw my child if proper arrangements are not made on a past due account.

**Parental Support:** "I appreciate the standards of the school and do not tolerate profanity, obscenity in word or action, dishonor to the Godhead and the Word of God, or disrespect to the personnel of the school. I hereby agree to support all regulations of the school in the applicant's behalf and authorize this school to employ discipline as it deems wise and expedient for the training of my child. I further agree to hold the school and its agents harmless for the liability to my child or any guardian or parent thereof because of any claims on behalf of my child against the school or any agent thereof because of any injury or alleged injury to my child. Should legal action, for any reason, be taken against Berean Christian School or any employee or agent thereof on my child's behalf, and the school or its agent not be found at fault, I agree to pay any attorney fees, court fees, damages or other costs that Berean Christian School or its agent should incur to defend itself against such action. This agreement will be in effect for as long as my child attends Berean Christian School.

"I agree to uphold and support the high academic standard of the school by providing a place at home for my child to study and giving my child encouragement in the completion of all work and assignments.

"I understand that the school reserves the right to dismiss any student who fails to comply with the established regulations and discipline or whose financial obligation remains unpaid.

"I give permission for photographs of my child to appear in In-school Displays, School Yearbook, Other School Publications, Outside Publications, and School Web Site.

"I have read the *BCS Satellite Handbook* and Satellite School Agreement, signed the Consent Form, and understand the terms stated on this Application and agree thereto."

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

\_\_\_\_\_  
(Signature of Father)

\_\_\_\_\_  
(Signature of Mother)