



BAYTOWN CHRISTIAN A C A D E M Y

Dear Prospective Parent,

Thank you for your interest in Baytown Christian Academy. The fall of 2016 begins our 37th school year of equipping students with the tools they need to engage the world around them, transforming it for the glory of God.

We hope that you will find the information in this registration packet helpful. If you have any questions you would like addressed before you complete the application packet, please call the school at 281-421-4150 and ask to speak with one of our academic deans.

If you decide to proceed with application process, the first step is to return the completed application packet for each child. When we receive your completed application we will schedule the appropriate admission interviews.

We look forward to serving you and your children in the coming year by providing an exceptional educational experience in the context of a Christian worldview. Thank you for considering BCA.

Respectfully,

Al Richard
Headmaster



Baytown Christian Academy

5555 N. Main
Baytown, TX 77521

Application For Admission

Applying for Grade _____
___ Male ___ Female
Application Date _____

STUDENT INFORMATION	
Student's Full Name _____	Preferred Name _____
Date of Birth _____	Age _____ Place of Birth _____
Social Security # _____	Race _____ Citizenship _____
Student Cell Phone # _____	Student Email _____

PARENT/GUARDIAN INFORMATION	
Student lives with (check all that apply) <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Stepfather <input type="checkbox"/> Stepmother <input type="checkbox"/> Other <input type="checkbox"/> Other	Check all that apply: <input type="checkbox"/> Father deceased <input type="checkbox"/> Mother deceased <input type="checkbox"/> Parents divorced <input type="checkbox"/> Parents separated <input type="checkbox"/> Father has custody <input type="checkbox"/> Mother has custody <input type="checkbox"/> Joint custody <input type="checkbox"/> Parents live together
Student's Primary Residence	
Street Address _____	
City _____ State _____ Zip _____ Home Phone _____	
Please check: <input type="checkbox"/> Father <input type="checkbox"/> Stepfather <input type="checkbox"/> Grandfather <input type="checkbox"/> Guardian	Please check: <input type="checkbox"/> Mother <input type="checkbox"/> Stepmother <input type="checkbox"/> Grandmother <input type="checkbox"/> Guardian
Full Name _____	Full Name _____
Preferred Name _____	Preferred Name _____
Cell Phone _____	Cell Phone _____
Email _____	Email _____
Occupation/Title _____	Occupation/Title _____
Employer _____	Employer _____
Work Phone _____	Work Phone _____
Unless you specify otherwise, the following items from above will be included in next year's School directory: home address, home, work, and cell phones; and emails. <input type="checkbox"/> Include me <input type="checkbox"/> Don't include me	

EMERGENCY CONTACT

Mr. Mrs. Ms. _____

Mr. Mrs. Ms. _____

Street Address _____

Street Address _____

City _____ State _____

City _____ State _____

Zip _____ Phone Number _____

Zip _____ Phone Number _____

Email _____

Email _____

Relationship _____

Relationship _____

SIBLING INFORMATION

Name _____ Age _____ Grade _____ School Attending _____

Name _____ Age _____ Grade _____ School Attending _____

Name _____ Age _____ Grade _____ School Attending _____

Name _____ Age _____ Grade _____ School Attending _____

Name _____ Age _____ Grade _____ School Attending _____

Name _____ Age _____ Grade _____ School Attending _____

EDUCATION INFORMATION

List schools previously attended beginning with most recent:

School _____ Grade(s) attended _____ Phone _____

School _____ Grade(s) attended _____ Phone _____

School _____ Grade(s) attended _____ Phone _____

School _____ Grade(s) attended _____ Phone _____

For the following questions, please explain any "yes" responses on a separate sheet of paper

- Yes No To the best of your knowledge, has the student ever used any type of non/prescription/non-medicinal drugs, alcohol or tobacco?
- Yes No Has the student ever been in trouble with the law?
- Yes No Has the student ever been suspended, expelled or asked to withdraw from any school attended?
- Yes No Has the student ever been evaluated or referred for evaluation, for learning disabilities/difficulties?
- Yes No Is the student currently taking any prescribed medication or following any prescribed or recommended therapy or treatment?
- Yes No Has the student ever either skipped or repeated a grade? If so, what grade? _____

QUESTIONS

CHURCH AFFILIATION

Church Name _____ Denomination _____

Pastor's Name _____

OTHER INFORMATION

Who or what led you to Baytown Christian Academy?

The answers provided in this application are true, accurate and complete as of this signature date.

Signature of Father/Guardian: _____ Date: _____

Signature of Mother/Guardian: _____ Date: _____

Photo Release

Baytown Christian Academy periodically uses photographs of our students for positive promotional materials in print and on our website. Please check and initial here if you wish to have your child's photographs excluded from any public communications, pending his/her acceptance to the school. _____ (initial)

ADMISSIONS AND FINANCIAL CONTRACT

_____(initial) I. I agree to fulfill all financial obligations throughout the school year. I agree that if I miss two consecutive payments during the school year, the child for who I am responsible can or will be automatically withdrawn from Baytown Christian Academy.

_____(initial) II. By signing the Admission and Financial Contract, the paren/guardian shall be responsible for the entire annual contractual amount whether or not the student attends classes, voluntarily withdraws, or is expelled from the school prior to the end of the academic year.

_____(initial) III. I understand that the school specifically reserves the right to hold transcripts, report cards and not allow final exams to be administered for students until all tuition and fees are current.

_____(initial) IV. The Curriculum Fee of \$500 is a mandatory fee that every student must pay. Curriculum fees are used to cover the cost of supplemental curriculum materials and textbooks. The fee does not cover the cost of all textbooks at the secondary level. This fee can be paid through monthly FACTS installments or as a one-time payment at registration.

Signature of Financially Responsible Party _____ Date _____

Printed Name _____

Signature of Enrolling Guardian _____ Date _____

Printed Name _____

NOTICE OF NONDISCRIMINATORY POLICY

Baytown Christian Academy (BCA) does not discriminate on the basis of gender, race, color, nationality, or ethnic origin in the administration of our educational policies, employment practices, admission policies, athletic programs, and other school-administrated programs.

for office use only:

Reg. date _____ amount \$ _____ cash/cc/check# _____ tuition: PIF _____ Sem. _____ Facts _____



BAYTOWN CHRISTIAN ACADEMY

COOPERATION AGREEMENTS

In partial fulfillment of its desire to see the goals and vision of Christian Classicism realized both within and without its institutional walls, Baytown Christian Academy sets forth the following as agreements expected from, and made with, students and parents alike. Please read carefully and sign below.

Student Cooperation Agreement

1. I commit to strive toward virtuous living in all I do, whether in thought, word or deed, both on campus and off.
2. I commit to strive for excellence in all I do as a student, in thought, word and deed.
3. I commit to cooperate obediently and respectfully with all those in authority over me.
4. I commit to submit obediently and respectfully to administrative policies of the School, including those of conduct and dress code.

Student Signature _____ Date _____
(To be signed by all incoming students, grade 3 and higher)

Parent/Guardian Cooperation Agreement

1. I commit to support the School with my time, talent, and/or treasure to the best of my ability.
2. I commit to expand my knowledge of and commitment to the goals and vision of Classical Christian education as expressed in the curriculum, pedagogy, culture, and philosophy of Baytown Christian Academy.
3. I commit to support and comply with all pertinent administrative policies of the School, including those of academic standards, discipline, dress code, cultural protocol, and conflict-resolution.
4. I commit to respect the final professional judgment of the School regarding my child's grade-level placement and continued enrollment in Baytown Christian Academy.
5. I commit both to remain in regular and open communication with my child's teachers and to ensure that the formal education begun in the classroom continues in the home, whether as study, homework, or work-ethic formation.
6. I commit to take any questions or concerns to the appropriate person, whether it be my child's teacher or an administrator.
7. I commit to bear financial responsibility for any and all damages caused to school property by my child.
8. I have read and understand the Tuition and Fees document (found in the prospective packet).

Father/Guardian Signature _____ Date _____

Mother/Guardian Signature _____ Date _____



APPLICATION CHECKLIST

These are the elements we will need in order to consider your student for enrollment.

- _____ Application for Admission
- _____ Copy of Birth Certificate
- _____ Current Report Card
- _____ Current Immunization Record
- _____ 2 Letters of Reference (One from Pastor)
- _____ Signed Cooperation Agreement