

BETHLEHEM CHRISTIAN SCHOOL

2024-2025 REGISTRATION PROCEDURES

REGISTRATION FORM

This form *must* be filled out completely. In order to register your child, we must have an emergency contact and your child's doctor and his/her telephone number. Please be very specific regarding any health conditions. If any information is omitted, we will not be able to continue the registration process until it is provided.

CERTIFICATE OF IMMUNIZATION STATUS FORM

Washington State Law (RCW 28A.210.160) requires that all children have this form completed and on file at the school, preschool or child care facility within 30 days of the start of the school year. *Even if you have turned in a form for previous years, you will need to provide another for this year.* Please ask your doctor for a copy or to email/fax it to us. We can also provide you with a blank form by request.

HOLD HARMLESS AGREEMENT

This form must be signed, dated, and returned with the above mentioned forms.

TUITION POLICY FORM

This form must be signed, dated, and returned with the above mentioned forms.

When you have completed all of the above forms, please bring them and your payment (non-refundable registration fee + Tuition Payment # 1) directly to the School Office. After your registration has been input on Brightwheel, you will have online payment options.

We will *begin* accepting registration forms at the following times:

- *Returning students, siblings and BLC members: beginning Tuesday, Feb. 20th*
- *New students: beginning: Friday, March 1st*

Please note: School office hours are 9:00 AM to 3:00 PM, Monday through Thursday and 9:00 AM to noon on Friday. The earlier you register, the better chance of getting into your preferred session. Our classes are filled on a first come/first served basis.

*Class lists and any other information will be sent to you on Brightwheel Messages.

*Please remember that it is your responsibility to notify us of any address or phone number changes that may occur over the summer months.

Thank you for choosing Bethlehem Christian School.
We look forward to serving you and your child!

Email: karen@blcmarysville.com Office: (360) 653-2882

www.bethlehemchristianschool.com

BCS CLASSES OFFERED 2024-2025

Preschool: age 3 by August 31st
Class size-14 students (2-day); 16 students (3-day)
Monday, Tuesday, Wednesday
9:00-11:30 AM or 12:30-3:00 PM
Thursday, Friday
9:00-11:30 AM

3-day Pre-K: age 4 by August 31st
Class size-18 students
Monday, Tuesday, Wednesday
9:00-11:30 AM or 12:30-3:00 PM

4-day Pre-K: age 4 by August 31st
Class size-18 students
Monday through Thursday
9:00-11:30 AM or 12:30-3:00 PM

Kindergarten: age 5 by August 31st
Monday through Thursday: 9:00 AM-3:00 PM
Friday: 9:00 AM-11:30 AM

TUITION 2024-2025

2-day Preschool: Annual tuition \$1,755.00
3-day Preschool and Pre-K: Annual tuition \$2,340.00
4-day Pre-K: Annual tuition \$2,745.00
(Preschool and Pre-K tuition may be divided into nine equal payments)

Kindergarten: Annual tuition \$5,000.00
(Kindergarten is nine months of instruction that may be divided into ten equal payments)

Registration fees: non-refundable
Preschool, Pre-K - \$150
Kindergarten - \$250 (Includes materials and book fee)

Bethlehem Christian School 2024-2025 Registration

7215 51st Ave. NE ~ Marysville, WA 98270
360-653-2882 www.bbcmarysville.com

PLEASE FILL OUT COMPLETELY

Child's legal name _____ Date _____

Goes by _____ Name you want them to learn to write _____

Birthday (month, day, year) _____ Current Age _____ Gender _____

Parent/Guardian Information:

Student lives with: Both parents _____ Mother only _____ Father only _____ Other _____

Mother's name _____ Father's Name _____

Address _____ Address _____

City _____ State _____ Zip _____ City _____ State _____ Zip _____

Phone # _____ Phone # _____

E-mail address _____ E-mail address _____

Occupation/employer _____ Occupation/employer _____

Work Phone _____ Work Phone _____

Is either parent a member of Bethlehem Lutheran Church? Yes _____ No _____

Other children in family (name, age): _____

Daycare Provider (name, phone): _____

Emergency contact (someone other than the parent, living nearby, and available during school hours):

Name: _____ Phone: _____

People you approve to pick-up your child:

Name: _____ Phone: _____

Name: _____ Phone: _____

Physician (name, phone): _____

Does child have any health issues? _____

Does child have any allergies? _____

Food Restrictions: _____

SESSIONS: 3-day AM Pre-K _____ 4-day AM Pre-K _____ 3-day AM Preschool _____
3-day PM Pre-K _____ 4-day PM Pre-K _____ 3-day PM Preschool _____
2-Day AM Preschool _____ Kindergarten _____

TUITION: 3-day: \$2,340 (9x\$260) 4-day: \$2,745 (9x\$305) 2-day: \$1,755 (9x\$195)
(Preschool and Pre-K tuition can be paid in full or divided into 9 equal payments)
Kindergarten: \$5,000 (10x\$500)
(Kindergarten tuition can be paid in full or divided into 10 equal payments)

Due when registering: Preschool and Pre-K: Payment #1 + \$150 registration fee
Kindergarten: Payment #1+ \$250 registration and materials fee
(Registration fees are non-refundable) Please see Tuition Policy regarding refunds.

If your child is currently in preschool, where does he/she attend? _____

For office use only

Date _____ Cash _____ Check # _____ Amount _____ Teacher _____

Do you have any concerns about your child's learning patterns? (Speech, Motor, Behavior)

Has your child been evaluated or enrolled in treatment for any of these concerns?

What are some goals you have for your child this year?

Tell us anything else about your child that you believe will help his/her teacher?

How did you hear about our school? _____

During the course of the school year, photographs of your child may be taken - individually or as part of a group. Do you give your permission for those photos to be used in publications?

Yes _____ No _____

Do you give permission for those photos to be used on the school's Brightwheel app?

Yes _____ No _____

Would you like to be on the mailing list to receive the Bethlehem Lutheran Church newsletter "REJOICE"? Yes
_____ No _____ Already receive it _____

Bethlehem Christian School admits students of any race, color, national and ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national and ethnic origin in administration of its educational policies, admission policies, and other school administered programs.

Please check the most appropriate ethnic/racial category from the following list:

- _____ Black not of Hispanic origin
- _____ Asian or Pacific Islander
- _____ American Indian or Alaskan Native
- _____ Hispanic
- _____ White not of Hispanic origin
- _____ Other not of Hispanic origin

Are there any languages other than English spoken at home?

**BETHLEHEM CHRISTIAN SCHOOL
2024-2025 TUITION POLICY**

When enrolling your child in BCS, be certain that you understand and agree to the following Tuition Policy:

- A non-refundable registration fee is required upon enrollment:
Preschool /Pre-K: \$150 registration fee; Kindergarten: \$250 includes materials/ book fee.
- The tuition is based on a total yearly amount. It takes into consideration all of the school days for the year, Christmas Break, Spring Break, holidays, and our start and finish days. We do not make up or offer tuition reimbursement for days you choose to not attend preschool, weather related school closures, emergencies, or county shutdowns.
- If you choose to make monthly payments, Preschool and Pre-K students can make 9 equal tuition payments; (Payment #1 of 9 is collected at registration.) Kindergarten students can make 10 equal tuition payments. (Payment #1 of 10 is collected at registration.)
- Monthly tuition payments are due on the first day of each month. Payments must be paid directly to the school, or on Brightwheel. We offer a grace period through the 10th of the month. Payments made after the 10th are subject to a \$10 late fee. A \$35 fee will be charged for any NSF checks, and checks will not be accepted from that account for future payments. If you have a circumstance that hinders your ability to pay on time, please make arrangements with the School Director.
- By signing this Tuition Policy, you are responsible for the full year tuition. If your account becomes more than 2 payments behind and no arrangements have been made, you risk your child being unenrolled. If your child simply stops attending the school and the office is not notified, the tuition will continue to bill and continue to be your financial responsibility.
- If it is necessary for you to withdraw your child from school, we ask that two weeks notice be given to the Director to allow for placement of another child to fill the vacancy. No refunds of prepaid tuition will be given if we do not have two weeks prior notice of withdrawal. After March 1st, no placement registrations are made, therefore, no refunds will be given. No refund of the tuition payment made at registration time is given after the school year has begun as those funds are used to start the year.
- We offer a 5% discount off the yearly tuition for those who pay in full by September 30th.

Tuition Schedule (If paying monthly)

Payment #	Due	2-day	3-day	4-day	Kindergarten
1	Registration	\$195	\$260	\$305	\$500
2	September 1	\$195	\$260	\$305	\$500
3	October 1	\$195	\$260	\$305	\$500
4	November 1	\$195	\$260	\$305	\$500
5	December 1	\$195	\$260	\$305	\$500
6	January 1	\$195	\$260	\$305	\$500
7	February 1	\$195	\$260	\$305	\$500
8	March 1	\$195	\$260	\$305	\$500
9	April 1	\$195	\$260	\$305	\$500
10	May 1	N/A	N/A	N/A	\$500
	Annual Tuition	\$1,755	\$2,340	\$2,745	\$5000

- Bethlehem Lutheran Church *members* will receive a discount off the annual tuition. Preschool and Pre-K \$45 (\$5 off of 9 payments) Kindergarten \$100 (\$10 off of 10 payments).
- Sibling discounts are available.

PARENT/GUARDIAN---PLEASE SIGN BELOW TO INDICATE YOU HAVE READ AND AGREE TO THIS TUITION POLICY.

Date _____

Signature _____

Student's name _____

Bethlehem Christian School Hold Harmless Agreement

Child Name: _____ Birth Date: ____/____/____

Parent/Guardian: _____

Primary Phone: _____ Secondary Phone: _____

IN CASE OF EMERGENCY, or in my absence, I hereby give permission to Bethlehem Christian School (BCS) authorized representatives to act on my behalf to hospitalize and/or secure proper treatment for my child as named on this form. I understand that every effort will be made to notify me first before treatment is administered. I acknowledge that my medical insurance will be the primary insurance billed, with BCS's insurance as a secondary insurance.

I do hereby release from any liability BCS representatives in the event of any accident. In the event of property loss or damage, I understand that my own homeowner's, renter's, auto, or medical insurance will be the primary insurance billed.

I hereby agree to indemnify and hold harmless BCS, Bethlehem Lutheran Church, and its officers, employees, and volunteer staff from any liability. I accept responsibility for any medical expenses as a result of any such injury sustained.

Parent/Guardian Signature:

_____ Date: ____/____/____

Additional children covered under this agreement:

_____ Birth Date: ____/____/____

_____ Birth Date: ____/____/____

_____ Birth Date: ____/____/____

_____ Birth Date: ____/____/____