



# ARKANSAS BAPTIST SCHOOL SYSTEM

## RE-ENROLLMENT APPLICATION

### 2012-2013

#### REGISTRATION FEE

\*K3, K4 and K5 Half Day Kindergarten - \$150 due IN FULL at the time of enrollment.  
 \*K3, K4 and K5 All Day Kindergarten and Grades 1-12 - \$300 total sum due or \$150 at time of enrollment and \$150 due on May 1, 2012. **A late fee of \$25.00 will be added to the student's registration fee if the student's full registration amount of \$300.00 has not been paid on or before May 1, 2012.**  
 \*Registration Fee is NON-REFUNDABLE and NON-TRANSFERABLE.

#### STUDENT INFORMATION

Names of Students to Re-enroll First and Last Name	2012-2013 Grade	Total Registration Fee Due	Registration Fee Paid
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____
<b>Total</b>		_____	<b>Total</b> _____

**CHURCH STUDENT(S) ATTENDS** \_\_\_\_\_

Registration Fee Paid \$ _____	Credit Card: _____ VISA _____ MASTERCARD _____ DISCOVER
Cash _____ Check # _____	Account # _____
	CSV Code _____ Expiration _____
	<small>(last 3 digits on back of card)</small>
Amount to be paid May 1, 2012 \$ _____	Amount charged at enrollment \$ _____
	Amount to be charged May 1, 2012 \$ _____
	Signature _____

#### FAMILY INFORMATION

PLEASE COMPLETE INFORMATION BELOW

**FATHER**

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ Zip \_\_\_\_\_  
 Home Phone \_\_\_\_\_ Cell \_\_\_\_\_  
 Email address \_\_\_\_\_  
 Employer \_\_\_\_\_  
 Occupation \_\_\_\_\_  
 Work Phone \_\_\_\_\_

**MOTHER**

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ Zip \_\_\_\_\_  
 Home Phone \_\_\_\_\_ Cell \_\_\_\_\_  
 Email address \_\_\_\_\_  
 Employer \_\_\_\_\_  
 Occupation \_\_\_\_\_  
 Work Phone \_\_\_\_\_

Please explain any guardianship arrangements \_\_\_\_\_

***Re-enrollment is considered complete upon receipt of this 4-page form, filled out in full, and the registration fee.***

# 2012-2013 FINANCIAL AGREEMENT

## FINANCIAL POLICIES

Tuition is paid over a 10-month period (August through May) or a 12-month period (June through May), unless you choose to pay annually or semi-annually.

1. Accounts not paid by the scheduled due date of the month in which they are due will be considered delinquent and shall be assessed a \$20.00 late fee for that month. Returned checks or declined credit card charges will be assessed the late fee *plus* a \$15.00 returned payment fee. Insufficient payments will be resubmitted with the late and insufficient fees added.
2. Students whose parents/guardians have an outstanding balance that is 60 or more days delinquent will not be permitted to attend classes until the account is brought to a current status.
3. Students whose parents/guardians have an outstanding financial obligation to ABSS from a previous school year will not be permitted to start school the next year until that obligation is paid in full.
4. Families with delinquent accounts will not receive report cards, transcripts, or diploma for a graduating senior until all financial obligations to ABSS are paid in full.
5. If you have a financial emergency and are temporarily unable to pay, please call the Business Office before you withdraw or get too far behind. You may qualify for tuition assistance, if available.

**I have read the Financial Policies above and on the following pages and will comply with the Arkansas Baptist School System as such.**

## PERSON RESPONSIBLE FOR ACCOUNT

**Print Name** \_\_\_\_\_ **Daytime Contact Phone** \_\_\_\_\_

**Address** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Student Name(s)** \_\_\_\_\_

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We, **THE PERSON(S) RESPONSIBLE FOR THE ACCOUNT**, understand by paying the registration fee, we are reserving a place for our child(ren) in the Arkansas Baptist School System for the 2012-2013 school year.

**A. REGISTRATION FEE**

The registration fee is **NONREFUNDABLE & NONTRANSFERABLE** unless the school is unable to accept the student. It is understood by us that the filing of this Financial Agreement is used by the School System to determine the number of teachers necessary within the System and determine the commitment of other financial resources.

**B. TUITION AGREEMENT**

We agree to pay the tuition for grade(s) \_\_\_\_\_, using the 2012-2013 tuition schedule.

**C. SOAR PROGRAM ONLY - If student is enrolled in the SOAR Program please complete the following:**

Student's Name \_\_\_\_\_ Grade \_\_\_\_\_ Learning Lab \_\_\_\_\_ Discovery \_\_\_\_\_ Both \_\_\_\_\_

Student's Name \_\_\_\_\_ Grade \_\_\_\_\_ Learning Lab \_\_\_\_\_ Discovery \_\_\_\_\_ Both \_\_\_\_\_

Student's Name \_\_\_\_\_ Grade \_\_\_\_\_ Learning Lab \_\_\_\_\_ Discovery \_\_\_\_\_ Both \_\_\_\_\_

Testing fees **ARE NOT REFUNDABLE** after student begins the testing.

**D. STUDENT EQUIPMENT FEE (One time fee - Grades 1-12)**

We agree to pay the **NONREFUNDABLE & NONTRANSFERABLE** student equipment fee, if applicable, as per the student equipment fee schedule.

**E. TRANSPORTATION FEE**

We agree to pay the **NONREFUNDABLE & NONTRANSFERABLE** transportation fee, if applicable, as per the transportation fee schedule. **(Space is limited. Additional transportation form must be completed and filed with the Business Office.)**

*(Please indicate transportation use):*

Student's Name \_\_\_\_\_ Grade \_\_\_\_\_

Student's Name \_\_\_\_\_ Grade \_\_\_\_\_

Student's Name \_\_\_\_\_ Grade \_\_\_\_\_

**F. BUILDING/TECHNOLOGY FEE (K3-K5 and Grades 2-12)**

We agree to pay the **NONREFUNDABLE & NONTRANSFERABLE** building/technology fee, if applicable, as per the student building/technology fee schedule.

**G. EXTENDED CARE**

Space is limited. Registration is not complete without additional forms (2) filed with the Business Office.

**H. MEMBERSHIP DISCOUNT**

Check if you are a member of LRFBC. Membership will be verified.

**I. EMPLOYEE DISCOUNT**

Check if you are a faculty/staff member.

# TUITION AND FEE PAYMENT PLANS

## ***BANK DRAFT AUTHORIZATION***

Please check one:

- 1) \_\_\_\_\_ **ANNUAL** *Due August 1, 2012*
- 2) \_\_\_\_\_ **SEMI-ANNUAL** *Due August 1, 2012 and January 3, 2013*
- 3) \_\_\_\_\_ **MONTHLY**

You may choose your payment date for either the  
(Mark one)  5<sup>th</sup> or  20<sup>th</sup> of each month

(Mark one)  10 months (August through May)  
or  
 12 months (June through May)

1. ABSS will deposit your draft on the exact date you select unless that date falls on a holiday, a weekend, or the business office is closed due to inclement weather. In these cases, your draft will be deposited on the next business day following your payment date.

Voided check must be attached here  
each year.

Checking Acct. \_\_\_\_\_  
Savings Acct. \_\_\_\_\_

## ***CREDIT CARD***

Please check one:

- 1) \_\_\_\_\_ **ANNUAL** *Due August 1, 2012*
- 2) \_\_\_\_\_ **SEMI-ANNUAL** *Due August 3, 2012 and  
January 3, 2013*
- 3) \_\_\_\_\_ **MONTHLY** (5<sup>th</sup> of each month only)  
(Mark one)  10 months (August through May)  
or  
 12 months (June through May)

**Please charge to my:**

\_\_\_\_ VISA \_\_\_\_ MASTERCARD \_\_\_\_ DISCOVER

**Acct #** \_\_\_\_\_

**CSV code** \_\_\_\_\_ **Exp. Date** \_\_\_\_\_  
*(last 3 digits on back of card)*

**Signature** \_\_\_\_\_

**Print Name** \_\_\_\_\_

**Date** \_\_\_\_\_

**Return to Robbie Bennett, Admissions Director  
62 Pleasant Valley Dr. \* Little Rock, AR 72212  
501-227-7077 ext. 368 \* FAX: 501-227-0060**