

**Bethel Christian Academy**  
**21 N. Earlton Road**  
**Havre de Grace, MD 21078**  
**Jonathan Flosser—Principal**  
**(410) 939-0174**  
**<http://bethelhdg.com/bethel-christian-academy/>**

**2023-2024 SCHOOL YEAR FEES**

**All fees are non-refundable**

Early registration (April 1 – June 15): \$300 per family

Registration (after June 15): \$350 per family

Book fees (K-4 and K-5) before August 1: \$75 per child

Book fees (K-4 and K-5) after August 1: \$100 per child

Book fees (grades 1-12) before August 1: \$275 per child

Book fees (grades 1-12) after August 1: \$300

Tuition: \$400 per month per child (September—May)

Tuition is due on the first of each month. A \$35 late fee will be added after the 10<sup>th</sup> of the month. All tuition is to be paid in advance.

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I have read and am in agreement with the fees as stated in the registration handbook.

\_\_\_\_\_  
(parent name—please print)

\_\_\_\_\_  
(parent signature)

\_\_\_\_\_  
(date)

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**REGISTRATION FORM**

Student name: \_\_\_\_\_

Date of registration: \_\_\_\_\_

Sex: \_\_\_\_\_M \_\_\_\_\_F

Date of birth: \_\_\_\_\_

Place of birth: \_\_\_\_\_

Race (optional): \_\_\_\_\_

Father: \_\_\_\_\_

Mother: \_\_\_\_\_

Guardian (if applicable): \_\_\_\_\_

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

\_\_\_\_\_

Home phone number: \_\_\_\_\_

Father's cell: \_\_\_\_\_

Mother's cell: \_\_\_\_\_

Occupation/Business Address/Business Phone Number

Father: \_\_\_\_\_

\_\_\_\_\_

Mother: \_\_\_\_\_

\_\_\_\_\_

Marital status: \_\_\_\_\_Married \_\_\_\_\_Living together \_\_\_\_\_Divorced \_\_\_\_\_Separated

Father: \_\_\_\_\_Deceased \_\_\_\_\_Remarried

Mother: \_\_\_\_\_Deceased \_\_\_\_\_Remarried

Pupil lives with: \_\_\_\_\_Both parents \_\_\_\_\_Father \_\_\_\_\_Mother \_\_\_\_\_Guardian

Language spoken at home: \_\_\_\_\_

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School Use Only

Date of entrance: \_\_\_\_\_

Medical Information

Emergency Contact and Medical Information			
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				M	F
Child's Name		Date of Birth		Sex	
Parent's/Guardian's Name		Parent's/Guardian's Name			
Home Phone	Work Phone	Home Phone	Work Phone		
Address		Address			
City, ST ZIP Code		City, ST ZIP Code			
Email address		Email address			

Alternative Emergency Contacts					
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Primary Emergency Contact		Secondary Emergency Contact			
Home Phone	Work Phone	Home Phone	Work Phone		
Address		Address			
City, ST ZIP Code		City, ST ZIP Code			

Medical Information					
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Hospital/Clinic Preference					
Physician's Name			Phone Number		
Insurance Company			Policy Number		
Allergies/Medications/Special Health Considerations					

1. Complete the following items, as appropriate, if your child has condition(s) which might require emergency medical care.
2. If necessary, have your child's health practitioner review the information you provide below and sign and date where indicated.

Child's Name: \_\_\_\_\_

Medical condition(s): \_\_\_\_\_

\_\_\_\_\_

Medications currently being taken by your child: \_\_\_\_\_

\_\_\_\_\_

Allergies/reactions: \_\_\_\_\_

\_\_\_\_\_

Date of your child's last tetanus shot: \_\_\_\_\_

**Emergency medical instructions:**

1. Signs and symptoms to look for: \_\_\_\_\_

\_\_\_\_\_

2. If signs/symptoms appear, do this: \_\_\_\_\_

\_\_\_\_\_

3. To prevent incidents: \_\_\_\_\_

\_\_\_\_\_

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Other special medical procedures that may be needed: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Note to health practitioner:**

If you have received the above information, please complete the following:

\_\_\_\_\_

Name of health practitioner

\_\_\_\_\_

Signature of health practitioner

\_\_\_\_\_

Date

\_\_\_\_\_

Telephone number

## **Standards of Conduct**

Bethel Christian Academy believes that the Bible is the infallible, divine Word of God. We must live according to that Word to be pleasing to God. We believe in separation from the world by a consecrated life unto God.

Girls will not be permitted to wear shorts or slacks to school or any school related activity such as field trips. All skirts and dresses must come to the bottom of the knee when standing. Jewelry or make-up will not be permitted with the exception of a watch and one ring.

Boys must have a neat, conservative haircut that includes a neat trim on the sides and back. Hair is not permitted over the ears or on the shirt collar. Belts must be worn each day. All pants must be worn at the waist.

All students should have a neat, respectful appearance while at school with shirt tails tucked in at all times

Students must complete all class work and homework assignments. Refusal to do so will result in demerits.

All students must have a King James Version of the entire Bible in class every day.

All students must be on time and participate in daily devotions. Failure to do so on a repeated basis will be cause for dismissal.

Students are expected to be respectful to all staff members at all times.

Students may have a cell phone at school; however, they are not permitted to make phone calls, text, or play on cell phones during school hours.

Students are expected to abide by these standards throughout their enrollment. Students found to be out of harmony with Bethel Christian Academy's ideals of work and life will be expelled if they fail to conform immediately.

## **Behavior Plan**

The best learning environment is one that is God-centered. In order to cultivate such a setting at Bethel Christian Academy, certain rules have been put in place. When one breaks these rules, a consequence is given. This is the way the Lord has designed authority to be—"the Lord disciplines those He loves" (Heb. 12:6). God desires you to "Obey your leaders and submit to their authority" (Heb. 13:17). When one consistently follows the rules, a reward is given, "The worker deserves his wages" (Luke 10:7). Please review the list below and familiarize yourself with the rules and consequences as you will be held accountable. Those who consistently violate a rule may encounter stricter guidelines. This list is not meant to be all-inclusive; however, it should provide you with some details to help you understand the standard of discipline BCA maintains. The administration reserves the right to hand down a stricter discipline if deemed necessary.

Offense	Consequence
Disturbing others	1 demerit
Running in learning center	1 demerit
Chewing gum	1 demerit
Consistent Lack of school supplies	1 demerit
Leaving Bible or books at home	1 demerit
Not returning items (HW/detention slips signed)	1 demerit
Incomplete/improper uniform	1 demerit
Minor scoring violation	1 demerit
Not setting goals	1 demerit
Unauthorized goal change	1 demerit
Using pencil to set goals	1 demerit
Having green pen at desk	1 demerit
Taking pencil to scoring station	1 demerit
Incomplete HW	1 demerit
Asking permission of another staff member after a refusal	1 demerit
Having cell phone in learning center	1 demerit
More serious violations	Consequence
Repeated violations of minor offenses	4 demerits
Lying	6 demerits
Fighting	6 demerits
Inappropriate or vulgar language	6 demerits
Disrespect	6 demerits
Defiance	6 demerits
Cheating or incorrect scoring (2 <sup>nd</sup> or more violations)	6 demerits

Four demerits results in a 20 minute detention, five demerits in a 25 minute detention, and six demerits results in a 30 minute detention. Detention will be served after school. A parent or guardian must sign the detention slip given to the student. As always, if there are any questions, please email the school/teacher.

Please sign and return the bottom portion of this paper.

**I have read the standards of conduct and the behavior plan for the Bethel Christian Academy 2023-2024 school year. I pledge to do my best to follow the rules and obey those in authority over me.**

\_\_\_\_\_ (student name)

\_\_\_\_\_ (student signature)

\_\_\_\_\_ (parent/guardian name)

\_\_\_\_\_ (parent/guardian signature)

\_\_\_\_\_ (date)

## Student Photo Release Form

I, \_\_\_\_\_ (parent/guardian) give Bethel Christian Academy permission to use my child's photograph or photographic image in official Bethel Christian Academy business, including but not limited to: school and church web site, school newsletters, and other publications. I understand that photographic images or video may be used for news organizations and promotional purposes.

I hereby waive any right that I may have to inspect or approve the finished product in which a photographic or video image may be used including the advertising copy or other matter that may be used in connection therewith or the use to which it may be applied.

\_\_\_\_\_ Yes, I agree with the release form.

\_\_\_\_\_ No, I do not agree with the release form.

Date: \_\_\_\_\_

Child's Name: \_\_\_\_\_

Parent Name: \_\_\_\_\_

Parent Signature: \_\_\_\_\_