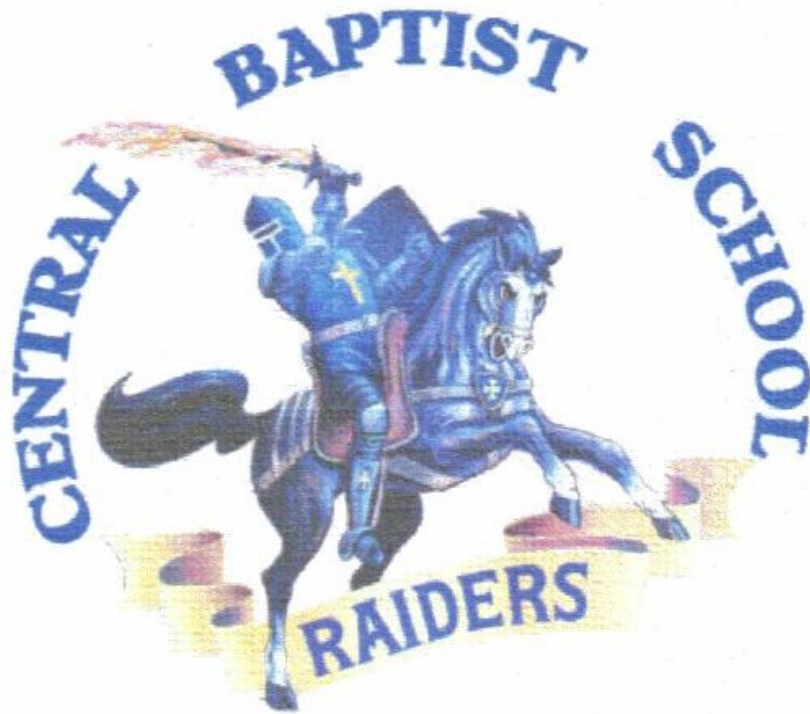


Central Baptist School Hattiesburg, Mississippi



Admissions Packet 2011-2012

"Train up a child in the way he should go: and when he is old,
he will not depart from it." Proverbs 22:6

Dear Friend,

Our enrollment includes 3-year-old kindergarten through grade 12. Central Baptist School has been established to meet the educational needs of children in a Christ-centered environment, with dedicated Christian teachers teaching the A Beka and Accelerated Christian Education curriculum in a spiritual and academic atmosphere.

For consideration of acceptance, the application and all of the forms included in this Admissions Packet must be filled out completely. Once the forms are submitted, an interview with the parents and children will be required prior to final acceptance.

Registrations are now being accepted. Any questions may be answered by calling our school office at 601-544-0161. We appreciate your considering Central Baptist School for your child's Christian education.

Chad Farber
Administrator

**CENTRAL BAPTIST SCHOOL
ADMISSIONS PACKET**

TABLE OF CONTENTS

Introduction 1

Financial Information & Agreement 3-4

Application 5-6

Standard of Conduct..... 7

Participant/Parent/Guardian Waiver & Indemnity Agreement 8

Request for Records 9

Medical Record/Release 10

Medical Information..... 11

Discipline Form 12

Corporal Correction Release 13

List of People Approved to Pick Up Child..... 14

Student Driver Information Sheet..... 15

Handbook Agreement 16

Student’s Pledge of General Policy 17

Parents-School Agreement 18



For office use only:

Student’s name _____ Grade _____

Fees paid:

Registration _____

Tuition _____

New student testing fee _____

New student application fee _____



CENTRAL BAPTIST SCHOOL
FINANCIAL INFORMATION & AGREEMENT

REGISTRATION (Fees cover books, insurance, yearbook & t-shirt)	
Grades K-4 through 12th	\$350.00
New student testing fee	30.00
Grades K-4 – 12 th application fee (new students only)	25.00

**All of the above fees are nonrefundable.*

TUITION

MONTHLY PAYMENT PLAN

Scheduled payments begin 8/1/11 and continue through 5/1/12.

K-4 thru 12 th student (\$2,400 per yr.)	\$240.00
Second student (\$2,000 per yr.)	\$200.00
Third & consecutive students (\$1,600 per yr.)	\$160.00

AFTER-SCHOOL CARE

After-school Care (for ages 4-10) per hour (3:30 p.m. – 5:30 p.m.) (\$5.00 per 15 minutes after 5:30 p.m.)	\$ 4.00
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- **Students attending one or more days in a month will owe for the entire month.**
- **Graduation fees will be determined by the cost of the cap and gown at the time of graduation.**
- **The sports fee will be determined at the time of each sport.**
- **We will have mandatory school-wide fundraisers, and we ask that parents help with these so that we may keep our fees reasonable. You may choose not to participate in fundraisers and pay the non-participation fee of \$150 per semester or \$300 for the year.**

- A 10% discount will be given if total yearly tuition is paid in advance of August 1, 2011.
- All charges are due on or before the 1st of each month. A \$15.00 late fee will be charged on all accounts not paid by the 10th of each month, and the child will not be allowed to return to school until the account has been paid or arrangements have been made with the Administrator.
- A \$40.00 fee will be charged on all returned checks as well as the \$15.00 late fee.

I agree to pay the stated charges for educational purposes, according to this agreement and further understand if I am paying by the month, the first payment is due on or before 8/1/11. I further understand that the last payment is due by May 1 with the exception of May's After-school Care fees due at the end of May.

Father's signature _____ Date _____

Printed name _____

Mother's signature _____ Date _____

Printed name _____



CENTRAL BAPTIST SCHOOL
35 P. D. Freeman Road, Hattiesburg, MS 39401
601-544-0161 or 601-544-0186

APPLICATION

Date: ___/___/___

STUDENT INFORMATION

Name _____
(Last) (First) (Middle)

Social Security Number _____

Address _____

City/State _____ Zip Code _____

Telephone _____ Birth date _____

Age _____ Sex _____ Grade entering _____

School last attended _____

Address _____

Student shirt size: YS YM YL S M L XL XXL

FAMILY INFORMATION

Father's Name _____

Employment _____

Position _____ Business Phone No. _____

Email address _____ Mobile No. _____

Mother's Name _____

Employment _____

Position _____ Business Phone No. _____

Email address _____ Mobile No. _____

Marital Status: Married _____ Living together _____ Divorced _____ Separated _____
Widow _____ Widower _____ Single _____

Children in family of school age not attending Central Baptist:

Name _____	Age _____
_____	Age _____
_____	Age _____

Reasons they are not attending Central Baptist: _____

APPLICATION (continued)

RELIGIOUS INFORMATION

Church attending _____

Address _____

Pastor _____

Father: Are you a Christian? Yes _____ No _____

Mother: Are you a Christian? Yes _____ No _____

Has student ever made a profession of faith in Christ? Yes _____ No _____

SCHOLASTIC INFORMATION

Has child ever been expelled, dismissed, suspended or refused admission to another school? _____

If yes, explain _____

Has child ever had disciplinary difficulties? _____ If yes, explain _____

Has child ever been in trouble with the law? _____ If yes, explain _____

Has child ever used tobacco or drugs? _____ If yes, explain _____

Please indicate academic level of pupil's previous work:

Excellent _____ Good _____ Average _____ Poor _____

Has child ever failed in school? _____ If yes, explain _____

GENERAL INFORMATION

How did you hear about this school? _____

**CENTRAL BAPTIST SCHOOL
STANDARD OF CONDUCT**

Student's name _____ Date: ____/____/____

The student's attitudes, conversation, behavior, and dress reflect the character of the institution from which he/she derives his/her training, both at home and church. This form reflects the church's attempts to secure students who would best adjust to the rigor of a highly-disciplined training program, which must set high standards in obedience to God's Word.

Are you a Christian? _____ At what age were you saved? _____

Do you attend public worship services regularly? _____
Where? _____

Do you accept the Bible as God's Word and submit yourself to its principles as the final authority? _____

Do you smoke? _____ Do you drink alcoholic beverages? _____ Do you dance? _____ Do you use narcotics (dope, pills, marijuana, etc.) of any kind? _____ Do you attend movies _____? Do you listen to rock music? _____ Have you ever run away from home? _____ If so, how long ago? _____

Will you honestly agree to keep all the rules in good spirit and respect authority without being critical and finding fault? _____ Do you really want to attend Central Baptist School? _____ Why? _____

**CENTRAL BAPTIST SCHOOL
PARTICIPANT/PARENT/GUARDIAN WAIVER
AND INDEMNITY AGREEMENT**

I, the parent or guardian of _____, gives permission for him/her to participate in school-sponsored activities at and away from Central Baptist School. I will inform the school by written request should I choose to keep my child from any activity or trip.

I authorize the representative of the school complete medical guardianship of my child in case of an accident or emergency. The representative of Central Baptist School is authorized to have _____ treated and given medical attention that is needed for his/her well being. The family doctor is _____, phone number: _____ . The recommended hospital is _____ . Otherwise, I give authority for the representative to make the choice of doctor and hospital.

I hereby for myself, my heirs, executors, and administrators waive and release Central Baptist School and any representatives, employees, agents, successors of the school from any liability or responsibility for injuries, damages or expenses that may occur to my child arising from any school activity, and I agree to indemnify and save harmless Central Baptist School and any representative of the school against any such claim for injuries, damages or expenses made by or on behalf of my child.

The above Agreement is to be in effect for the school year beginning August 1, 2011, and ending May 30, 2012.

Father's Signature _____ Date: ___/___/___
Father's Address _____ Phone _____
Employer _____ Work No. _____

Mother's Signature _____ Date: ___/___/___
Mother's Address _____ Phone _____
Employer _____ Work No. _____

Student's Date of Birth ___/___/___ Age _____ Grade _____

Do you carry health insurance on the student? Yes ___ No ___

Name of Insurance Company _____ Policy No. _____

Does the student have any physical problems of a medical nature or allergies to medicines? _____

If so, please list all known medicines _____

Please list two people other than parents to be contacted in case of emergency:

Name _____ Relationship _____
Daytime Phone No. _____ Work Phone No. _____

Name _____ Relationship _____
Daytime Phone No. _____ Work Phone No. _____

**CENTRAL BAPTIST SCHOOL
REQUEST FOR RECORDS**

TO: _____
School _____
Address _____
City _____ State _____ Zip Code _____
Student _____ Grade _____ Birthdate _____

has enrolled in our school. Please send us the cumulative permanent record folder for this student, including transcripts of past academic records, grades earned during the current year to date, record of attendance, medical and immunization records, standardized tests, and any other pertinent information available.

Father's signature Date: ___/___/___

Mother's signature Date: ___/___/___

**CENTRAL BAPTIST SCHOOL
MEDICAL RECORD/RELEASE**

Student's Name _____ Birthdate ___/___/___ Sex _____
Telephone Number _____ Address _____
City, State, Zip _____

Please list any present or on-going medical conditions your child has (i.e., heart ailments, diabetes, allergies, convulsions, etc.) _____

Please list any medications for which your child has an allergy _____

Please list any medications which your child is now taking _____

Does your child need to wear a Medic-Alert Tag for a special medical condition? Yes ___ No ___
If yes, please define _____

I, the parent/guardian of _____ give medical release and permission to Central Baptist School for security emergency medical care by qualified medical personnel for my child.

Father's signature

Date: ___/___/___

Mother's signature

Date: ___/___/___

**CENTRAL BAPTIST SCHOOL
MEDICAL INFORMATION**

I, _____, give Central Baptist School permission to administer medication to _____ as needed and deemed necessary by his/her teacher. I understand that medication must be turned in to the school office and will be kept for my child's use. I have listed below the medications I will provide that may be taken by my child. I will also list any known allergies that will severely affect my child.

Signature _____
Printed Name: _____

*****Medications to be administered:**

Please provide a small amount of any medicines that your child may periodically need to take while at school. A zip-loc bag with your child's name, medicine name and dosage will be needed for each medicine. Thank you for your help.

Please check your preference:

- Please inform me each time my child receives medication. (A note will be sent home.)
- Please administer medicine as deemed necessary. (Parent will be informed when medication begins to run out.)
- DO NOT administer any medication to my child without first obtaining verbal permission.

******If any prescriptive medicine must be administered, please notify your child's teacher and turn in written directions to the school office.***

**CENTRAL BAPTIST SCHOOL
DISCIPLINE FORM**

Some children do not adjust to a disciplined academic environment and find excuses to criticize the policies and decisions of staff and administration. In such cases, the school reserves the right to have full discretion in the discipline, with corporal punishment used if considered appropriate, to place such students on probation for a reasonable corrective period of time, and to dismiss any student who does not cooperate with the total educational process.

PARENT PLEDGE:

I recognize that Central Baptist School has a highly-qualified, trained staff and I have confidence in their ability to perform the educational functions due my child.

I realize that from time to time children take issue with actions that they do not agree with and that they are prone to criticize statements out of context. This being normal for children, I pledge that should such occur, I will not support the criticism, that I will correct my child, support the school personnel, and call in for full details at any time I have a question concerning an incident.

I further realize that building strong relations with my child's supervisor to aid in the training of my child is as much my responsibility as it is the school's, and that I will pray for the staff and program, cooperate with them in discipline accepting their judgment in such matters, lay a spiritual foundation through Godly example in the home, support the spiritual training of chapel, revivals, etc., follow through with any work assignments or slips to be signed, see that the children reach school on time, phone or send written excuses for absence or tardiness, cooperate in training the children to respect school property and pay for irregular abuse of the same, attend all parent functions, and assist in publicizing the school and its programs among friends.

I realize that attending Central Baptist School is a privilege and not a right. It is my intention to abide by the decisions and support the discipline of the administration.

Father's signature

Date: ___/___/___

Mother's signature

Date: ___/___/___

**CENTRAL BAPTIST SCHOOL
CORPORAL CORRECTION RELEASE**

Student's Name _____

Central Baptist School is honored that you have asked our staff to assist you in training your child for Christian leadership. Our total program is designed to develop spiritual and academic qualities. We believe it is necessary to follow Scriptural admonition to correct a child when his/her behavior is in violation of proper or reasonable rules and procedures. When warranted, corporal punishment will be exercised under the following guidelines:

1. The offense will be clearly discussed with your child.
2. A staff member will discuss Scriptural applications and will pray with your child.
3. A reasonable number of firm strokes, not to exceed three, will be administered by a staff member of the same sex as your child, using a simple, flat paddle.
4. Your child will not be physically restrained. (If he or she refuses to submit to the paddling, you will be asked to come to the school to discuss the matter; and if it is believed to be in the best interest of the school, the child will be withdrawn from the school.)
5. After the administering of the strokes, the staff member will pray with your child, assuring him or her of his love.
6. A written record will be made of the date, offense, number of strokes, and the name of the correcting staff member. A copy will be sent to you.

____ I have read the above and agree to support the school in its policy of corporal discipline without reservation, and personally pledge our support to this Scriptural approach to discipline.

____ I do not give permission for my child to be disciplined in this manner, I do pledge to administer appropriate discipline.

____ Please call me at _____ before any corporal punishment is administered.

Signature of Father or Legal Guardian

Signature of Mother or Legal Guardian

Date signed _____

Date signed _____

CENTRAL BAPTIST SCHOOL
LIST OF PEOPLE APPROVED TO PICK UP YOUR CHILD

Please fill out the form below and return it to the school. If your child is to be picked up by anyone beside parents, please list the names of approved people. If your child needs to be picked up by someone other than those on the list, please send written permission with your child. If your child is in a carpool, list all students who will be together.

No students should arrive before 7:30 a.m. and all students should be picked up by 3:30 p.m. unless they are attending After School Care.

Name of Student(s) _____ Grade(s) _____

List of approved people to pick up your child(ren):

Name _____ Relationship _____
Phone _____

Name _____ Relationship _____
Phone _____

Name _____ Relationship _____
Phone _____

Carpool students:

Parent's signature

Date: ____/____/____

**CENTRAL BAPTIST SCHOOL
STUDENT DRIVER INFORMATION SHEET**

Student's Name _____

Central Baptist School takes the safety of your student as one of its top priorities. In doing so, we ask that each student driver submit a copy of their valid Mississippi license and proof of insurance. We believe that driving is a privilege and not to be handled lightly. The following is a list of guidelines for student drivers:

1. Students should park their vehicles in the spaces closest to the football field.
2. Students should enter the parking lot using the south driveway entrance and exit the parking lot using the north driveway entrance.
3. Students are not allowed to leave campus without a written note from their parent or verbal consent given to the office.
4. Students are not allowed to go to their vehicles at any time, unless given permission by a staff member.
5. Students caught speeding or misusing their vehicle while on property could lose their driving privileges.

I have read the above and agree to support the school in its driving policies as to maintain the safety of my student driver and the other students attending Central Baptist School.

Signature of Parent or Legal Guardian

Signature of Student Driver

Date signed _____

Date signed _____

**CENTRAL BAPTIST SCHOOL
HANDBOOK AGREEMENT**

I have read the handbook and admission packet and agree to insist that my child submit to the program, academic and disciplinary regulations, and all other requirements instituted by the Administration and carried out by the Principal and Faculty.

Signature of Mother _____

Signature of Father _____

Date: ____/____/____

**CENTRAL BAPTIST SCHOOL
STUDENT'S PLEDGE OF GENERAL POLICY**

Students are expected to abide by the rules set forth in the Student Handbook throughout their enrollment at Central Baptist School whether at home, school, or elsewhere. Students found to be out of harmony with this school's ideals of work and life may be invited to withdraw whenever the administrator determines it is necessary.

As a student of Central Baptist School, I pledge to uphold the school's standards against rap, rock music, cheating, swearing, smoking, gambling, drinking alcoholic beverages, using or talking favorably about narcotics, or using indecent language, and will act in a very orderly and respectful manner. I will maintain Christian standards in courtesy, kindness, morality, and honesty.

I will strive to be of unquestionable character in dress, conduct, and other areas of life. I agree to abide by the above standards of conduct and other regulations expected of each student enrolled in this school while I am a student attending the school, and will not give the impression to students, parents or faculty that I am not in harmony with the goals, aims, and standards of the Christian school.

Student's signature

Date: ___/___/___

Father's signature

Date: ___/___/___

Mother's signature

Date: ___/___/___

CENTRAL BAPTIST SCHOOL PARENTS-SCHOOL AGREEMENT

IN ORDER TO SOLEMNIFY the desire of the undersigned parties to glorify the Lord with their obedience to Him and to promote a clear understanding of the duties and responsibilities of each party, the undersigned parties adopt the following Agreement:

I, _____, for and in consideration of my child _____, being admitted as a student at Central Baptist School, do hereby accept such admission and the duties and responsibilities entailed therein and agree to be bound by the terms of this Agreement.

1. I subscribe without reservation to the Articles of Faith and the Standards of Conduct of Central Baptist School and agree that my family will abide by these doctrines in all aspects of our lives, both at and away from school ministries and functions. I am a member of _____, faithfully attending all public services and taking an active part in the total church program. I agree to be loyal to the pastor and the church programs in word and in deed. I agree to fulfill all duties and responsibilities of membership in my church.
2. I understand and agree that the church and the school ministry are inseparable and that my child may be expelled from the school if either of us is out of fellowship with the church, as determined in sole discretion of the pastor and church leadership.
3. I have read and understand the Central Baptist School Handbook and I agree with it completely. I agree that my child and I must abide by the policies, rules, and regulations of the school, including those listed in the Handbook, and I agree to support Central Baptist School with my conduct and my prayers.
4. I understand and agree that the education of my child will be guided by the instructors and other school officials. I agree that my purpose in obtaining a Christian education for my child will be achieved by following the curriculum set by the instructors. To that end, I agree that I will require my child to perform all duties and responsibilities entrusted to him by the instructors and school officials to the best of his/her ability to their satisfaction. I will support the decisions of the instructors and school officials and will never attempt to undermine their authority. I understand and agree that during my child's enrollment, the courses offered and the instructors teaching them may change from time to time at the discretion of the school leadership.
5. I understand and agree that my child has no right to publish and distribute a student newsletter or any other publication. I understand and agree that Central Baptist School has the right, in its sole discretion, to control what is published, circulated, or otherwise distributed at its school to its students or staff, and I will ensure that my child understands this provision.
6. I understand and agree that attending Central Baptist School is a privilege and the school reserves the right to suspend or expel my child from the school in accordance with its

official policies as determined by the school. Notwithstanding anything to the contrary contained herein, this Agreement does not bind either party to any specific period of enrollment. Either party may terminate this Agreement without cause upon a seven (7) days' notice. I understand that no rights or presumptions of continued enrollment are conferred or implied by this Agreement or by a number of consecutive Agreements. I further agree that no right to notice of renewal or nonrenewal of the Agreement is conferred or implied.

7. I agree to pay all tuition and fees in a timely manner as set forth in Central Baptist School's Handbook. I understand that monthly tuition payments are due on the first day of each month. I further understand that if I fail to make timely payments, my child may be withdrawn from school and I may be subject to late-payment fees and other costs, including any necessary costs of collections in accordance with school policy.
8. As Central Baptist School is a Christian ministry organization, both parties agree that they would never make demands, threaten to sue, or actually litigate any matter whatsoever relating to or resulting from this Agreement. I understand that making demands, threatening to sue, or actually litigating a matter against Central Baptist School or Central Baptist Church clearly violates Biblical teaching and practice and shall constitute sufficient grounds for immediate withdrawal of all my children from enrollment at Central Baptist School. I understand that retaining or instructing an attorney to contact the ministry with regard to a potential claim or dispute will be interpreted as a threat to sue. Accordingly, the parties agree to resolve all potential claims, disputes, or causes of actions through binding arbitration using the procedures outlined in the attached procedures.
 - a. I agree to follow the Biblical pattern of Matthew 18:15-17 and Galatians 6:1 and always give a good report. All differences are to be resolved by utilizing Biblical principles – always presenting a united front.
 - b. The parties agree that the methods outlined in this section shall be the sole remedies for any and all controversies or claims arising out of the employment relationship or this Agreement and expressly waive their right to file a lawsuit against one another in any civil court for such disputes, except to enforce a legally binding arbitration decision.
 - c. I agree to do everything in my power to avoid involving Central Baptist School or Central Baptist Church in any legal proceedings that may take place or legal requests for documents or testimony of school officials concerning the custody and/or education and upbringing of my child. I understand that if in spite of my attorney's and my best efforts, any school official is legally compelled to provide testimony or documentation beyond a copy of my child's standard academic records. I understand that my child may be immediately disenrolled from Central Baptist School and my account may be charged for any and all expenses incurred in complying with such legal process.
9. The parties agree that there are no other agreements or understandings between them relating to the subject matter of this Agreement. This Agreement supersedes all prior agreements, oral or written, between the parties and is intended as a complete and exclusive statement of the agreement of the parties. Neither this Agreement nor its execution have been induced by any reliance, representations, stipulations, warranties, agreements, or

understandings of any kind other than those expressed herein. If any provision of this Agreement is found to be void or voidable, it shall not affect the validity of any other provision. Both parties shall remain bound by all provisions.

10. I certify that I will explain this Agreement and its meaning to my child. I will assist the school in every way necessary to ensure my child abides by all the terms of this Agreement.

11. I understand that this Agreement shall not take effect until fully executed by all parties.

I understand this Agreement and its content and agree to abide by its terms and all rules which apply to students.

Father

Mother

Student (7th grade and above)

(ACCEPTED AND APPROVED BY _____, ADMINISTRATOR.)