



Dear Parents,

Thank you for your interest in Bay Baptist Academy. Enclosed is the information you need in considering BBA for your child. The first step is to complete the application and return it to the school as soon as possible. After receiving and reviewing your application, you will be called to schedule an interview. If at all possible, we would like for both parents to be present. It is required that your child be present.

Our Mission... and the mission of the administration, faculty, and staff of Bay Baptist Academy is to equip students with the knowledge and tools necessary to glorify God to the maximum of their potential for the remainder of their lives.

Our Program... includes activities and curriculum that have been very professionally designed to give your child an excellent foundation. We use the Accelerated Christian Education curriculum throughout our school.

Our Purpose... is to train students to have solid academics, godly character, and a Christian world view, teaching them to be knowledgeable, articulate, and productive individuals for the glory of God wherever life leads them. We will strive for excellency in every area of their education and consider this endeavor to be a calling from God.

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

You can visit us online at www.baybaptistacademy.com for more information. May God bless and direct you as you seek to do the very best for your children.

Sincerely,
Jeremy Hall



ENROLLMENT PROCEDURES

TO APPLY:

Complete an **Application for Admission** form for each child you want to enroll and return it to the school office as soon as possible. **Applications** are available on our website or may be requested from the school office.

INTERVIEW:

The Academy will contact you to schedule a parent/child interview. At least one parent (preferably both) must be present at the interview. This interview will consist of: reviewing the Student Application and acquainting parent and child of our school policies. As needed, this time will also be used to test the potential student to determine the appropriate educational level. It is also a good time to familiarize you with our philosophy of discipline and classroom expectations.

ACCEPTANCE:

You will be informed of your child's acceptance in our school by phone or during the interview. Upon notification of acceptance, please submit the following to assure your child a place in our school:

- A. Registration Fee paid immediately upon acceptance.
- B. Book and Supply Fee must be paid within two weeks of acceptance.
- C. Signed copies of the Financial Contract, Statement of Cooperation, Statement of Faith, and Philosophy of Discipline.
- D. A copy of the Birth Certificate.
- E. A current Immunization Certificate.



STUDENT APPLICATION

Grade R _____ Grade 1 _____ Grade 2 _____ Grade 3 _____

Grade 4 _____ Grade 5 _____ Grade 6 _____ Grade 7 _____

Date of Application _____

All questions must be answered before application will be considered.

STUDENT INFORMATION *Please give legal name of student.*

Last Name _____ First _____ Middle _____

Preferred Name _____ DOB _____ Age _____ Male _____ Female _____ Soc. Sec # _____

Address _____

Street

City

State

Zip Code

How did you find out about BBA? _____

FAMILY INFORMATION

Father's Name: _____ Living with family? _____

Address _____

Cell Phone _____ Work Phone _____

Mother's Name: _____ Living with family? _____

Address _____

Home Phone _____ Cell _____ Work Phone _____

Place(s) of Employment Father: _____ Mother: _____

PARENTS' MARITAL STATUS: Married _____ Separated _____ Divorced _____ Widowed _____ Single _____

Who has legal custody of this child? _____

FAMILY'S E-MAIL ADDRESS: _____

Last daycare or school attended? _____

Name

Address

Previous director or principal: _____ Phone _____

Reason(s) for leaving: _____

GENERAL INFORMATION

Why do you want your child to attend Bay Baptist Academy? _____

Briefly state your philosophy of child discipline: _____

Has this child experienced academic, social, or disciplinary problems in his/her previous school?
Yes_____ No_____ If yes, identify the areas and explain:_____

Has your child been diagnosed as having a learning disability or other conditions that would affect educational performance? Yes_____ No_____ If yes, please explain:_____

Is this child currently taking any prescription medications? Yes _____ No _____ If yes, please identify and explain:_____

Does the family attend Sunday school or church regularly? Yes_____ No_____

The family's church:_____ Pastor:_____

Are you a Christian? If yes, on what do you base your answer?

Father: Yes_____ No_____ Basis: _____

Mother: Yes_____ No_____ Basis: _____

PERMISSIONS

- I give my child, _____, permission to go on any field trip with BBA and to ride the BBA transportation.
- Yes, I give my permission to have my child's picture posted on the school website and social media.

REFERENCES

Two friends or associates (not relatives) who know you well:

Name	Address	Phone
Name	Address	Phone

We appreciate your consideration of Bay Baptist Academy for your child. Please sign below and return the application to the school. Your application will be reviewed and you will be contacted by phone regarding the status of your child's admission.

To the best of my knowledge, the information given on this application is true and accurate.

Signatures of parents or guardians



EMERGENCY - PERMISSION FORM

Provider's Name: Bay Baptist Academy **Date:** _____

Child's Name: _____

Hair Color: _____

Eye Color: _____

Birth Date: _____

Address: _____

Home Phone: _____

Mother's Name: _____ **Work Phone:** _____

Father's Name: _____ **Work Phone:** _____

Mother's Cell Phone: _____ **Father's Cell Phone:** _____

Emergency Contact: _____ **Phone:** _____

Child's Doctor: _____ **Phone:** _____

Insurance Company _____ **Policy #** _____

Allergies: _____

Medication: _____

Medical Condition: _____

It is the child care provider's policy to notify a parent when a child is ill or in need of medical attention. Occasionally we are unable to contact parents, and we need to get immediate help for the child.

Our procedure is to have the child taken to the nearest emergency service by ambulance. (Ambulance fee is the parent's responsibility.)

If an ambulance is not available, the child care provider/staff of the school will transport the child.

I hereby give permission to the child care provider/staff of Bay Baptist Academy to make necessary transportation arrangements for my child who has become ill or injured.

Signature of parent/guardian

Signature of parent/guardian

Date

Date

Patient's Health History

Provider's Name: _____ Group/Practice Name _____

Type of Provider: Doctor Physician's Assistant Nurse Practitioner Location _____

Other than at birth, has the child been hospitalized? No Yes

Reason: _____

Location: _____ Age: _____

Has the child had any surgery? No Yes Describe: _____

Has the child had any x-rays? No Yes Describe: _____

It the child allergic to any of the following: (Please list type of reaction)

Medications No Yes _____

Injections No Yes _____

Foods No Yes _____

Other No Yes _____

Does the child take: Vitamins Iron Fluoride Other Medications _____

Has the child ever had any of the following: (Check as many as apply)

- | | | |
|--|---|---|
| <input type="radio"/> Anemia | <input type="radio"/> Arthritis | <input type="radio"/> Frequent Nose Bleeds |
| <input type="radio"/> Asthma | <input type="radio"/> Diabetes | <input type="radio"/> Chronic Cough |
| <input type="radio"/> Allergic rhinitis | <input type="radio"/> Strep Throat or Scarlet Fever | <input type="radio"/> Frequent Stomach Ache |
| <input type="radio"/> Atopic Dermatitis (Eczema) | <input type="radio"/> Broken Bones | <input type="radio"/> Frequent Vomiting |
| <input type="radio"/> Urinary Tract Infections | <input type="radio"/> Head Injuries | <input type="radio"/> Frequent Diarrhea |
| <input type="radio"/> Pneumonia | <input type="radio"/> Cuts Requiring Sutures | <input type="radio"/> Constipation |
| <input type="radio"/> Croup | <input type="radio"/> Loss of Consciousness | <input type="radio"/> Bed Wetting |
| <input type="radio"/> Seizures | <input type="radio"/> Accidentally Taken Medication or Poison | <input type="radio"/> Dental Problems |
| <input type="radio"/> Heart Murmur | <input type="radio"/> Vision Problems | <input type="radio"/> Chicken Pox |
| <input type="radio"/> High Blood Pressure | <input type="radio"/> Hearing Problems | <input type="radio"/> Other _____ |
| <input type="radio"/> Hepatitis or Jaundice | <input type="radio"/> Frequent Headaches | |

Was there any delay in the child's learning to: Sit Walk Talk

Does the child have difficulty in school with: Not in School Learning Behavior Other _____

How many days of school has the child missed in the past 6 months? _____

Describe the child's behavior by marking the appropriate category:

	No Problem	Minor Problem	Major Problem
Short Attention Span	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cannot Sit Still	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Aggressive	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Unusually Quiet	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Overly Active	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Extremely Poor Loser	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Difficulty Getting Along With Others	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Additional Concerns: _____



STATEMENT OF FAITH

What We Believe

- We believe in the divine authority and inspiration of the Scriptures. (II Timothy 3:16)
- We believe in the personality, deity, and present work of the Holy Spirit. (John 7:38-39)
- We believe in the total depravity of man. (Genesis 6:5)
- We believe that there is a literal hell, a place for the eternal and conscious punishment of all the unsaved. (Matthew 25:41)
- We believe in the virgin birth and deity of Jesus Christ. (Matthew 1:18-25)
- We believe that salvation is by grace through faith in Jesus Christ. (John 3:16, John 5:24, I John 4:17)
- We believe in the security of the believer. (Luke 10:20, John 3:36)
- We believe that once a person is saved, they should be baptized by immersion. (John 3:23, Acts 2:41, Romans 6:3-6)
- We believe literally in the Genesis account of creation. (Genesis 1:1, Genesis 2:21-23, Exodus 20:11, Acts 4:24, Hebrews 11:3)
- We believe in the pre-tribulational, pre-millennial coming of the Lord Jesus Christ. (Matthew 28:18-20, Luke 12:35-40, II Timothy 3:1-5, Revelation 19:11-16)
- We believe that God created only two genders, male and female. (Genesis 1:27)

This Statement of Faith does not exhaust the extent of our faith. The Bible itself is the sole and final source of all that we believe.

We have read and agree with this Statement of Faith:

Parent/Guardian's Signature

Date

Parent/Guardian's Signature

Date



FINANCIAL AGREEMENT TUITION AND FEE PAYMENT POLICY

1. Payments for tuition and fees must be made through EFT and cash in the school office.
2. TUITION payments are paid monthly and are due in the school office on the first of the month. A payment is late when paid after the 10th. A late payment fee of R200 will be charged. If payment isn't made by the 15th of the month, your child will have to withdraw from school until finances are settled with the school.
4. Registration fees, and re-enrollment fees are not refundable except in the event the family or student moves out of the area before school begins.
5. No reductions are allowed for absences from school or holidays.
6. In case of withdrawal from BBA, all payments must be made to ensure release of report cards, records, and transcripts.
7. Late Pickup: I understand that I will be charged (and agree to pay) a late pick-up fee of R10 per minute for the first five minutes and R50 per minute thereafter. In the event of an emergency, I will call the school.
8. Withdrawal: If I plan to withdraw my child from the Academy, I will submit a written notice at least two weeks in advance.
9. We will make timely payments of all tuition and fees for the school year.

We have read the above stated policies and hereby agree to its terms:

Parent/Guardian's Signature

Date

Parent/Guardian's Signature

Date

Financially Responsible Party-if other than Parent/Guardian

Date



PERMISSIONS FORM

Student Name _____ Class to Enter _____
Last First Middle

Parents' or Guardians' Names: _____

• **SPECIAL PICKUP AUTHORIZATION:**

NAMES OF PERSONS AUTHORIZED TO PICK UP YOUR CHILD	RELATIONSHIP TO CHILD	THE PERSON'S CELL or HOME NUMBER

• **AUTHORIZATION FOR MEDICAL TREATMENT**

In the event of an emergency requiring a physician's care, would you like us to call your family physician? Yes _____ No _____ If yes, please provide the following information.

Physician's Name: _____ Phone Number: _____

Address: _____ City: _____ State: _____ Zip: _____

- I give my permission to use my child's image taken/recorded during school events for advertising purposes.
- I give my permission for my name, address, phone number, and email address to be published in the school directory.

Parent/Guardian's Signature Date

Parent/Guardian's Signature Date



STATEMENT OF COOPERATION

We, the parents/guardians of _____,
Student(s) Name (s)

commit to the following:

We agree that the spiritual development of our child(ren) is the responsibility of the home, church, and school. We will endeavor to be involved in each of these areas.

We agree with and support the doctrinal statement, mission, vision, purpose, and philosophy of discipline of the Bay Baptist Academy.

We pledge our loyalty to the faculty, staff, and administration of BBA, and will bring any concerns to the person(s) involved.

We understand and will encourage the importance of our child developing respect for those who have been placed in authority over them and respect the rights and property of others.

We understand that parent support and cooperation is vital for the success of the school and the child. We therefore pledge our attendance at parent meetings and special programs that our children participate in and when available, will go on our child's field trips.

We understand that the Academy staff agrees to work closely with the parents or guardians in all areas of school life and will communicate in a timely fashion any school-related problem or concern.

We understand that Bay Baptist Academy is a ministry and operates on the principle of faith. Tuition and fees are set according to an approved budget in an effort to make quality Christian education affordable to those who desire it for their children.

As the Lord provides, we will prayerfully consider gifts of time, talent, and finances to help meet needs and make improvements in the Academy. We also commit to upholding BBA in prayer.

We understand that attendance at BBA is a privilege and not a right.

We will do our best to tell others about the excellence in childcare and Christian education that our child is receiving at BBA.

We have read the Parent Statement of Cooperation and hereby agree to its terms:

Parent/Guardian's Signature

Date

Parent/Guardian's Signature

Date



PHILOSOPHY OF DISCIPLINE

Building a foundation for life

Bay Baptist Academy strives to provide a safe, secure, happy, caring, and loving environment for every child that is enrolled. Believing that discipline is necessary for the welfare of the student as well as the entire school, each teacher is given the responsibility of making and enforcing classroom regulations in accordance with the Christian principles and discipline as set forth in the Scriptures. The teacher and administration take this responsibility seriously and will maintain communication with the parents regarding any discipline matters.

Child training and discipline is nurturing. Nurturing will be handled with kindness, love, and understanding. Attention will be given to specific needs of each child, while at the same time each child will be encouraged to become a part of the group through participation.

The Academy expects and needs the full cooperation of the students and the parents. If at any time the school believes this cooperation is lacking, the parent(s) will be asked to confer with the administrator and teacher in order to seek appropriate steps to bring about a positive change. If poor cooperation continues, the parent(s) will be asked to withdraw the student.

Discipline shall be age and developmentally appropriate. We realize that children need to be taught right from wrong. With the Bible as our basis, we will endeavor to "train up a child in the way he should go." Proverbs 22:6

How will our teachers deal with bad behavior? A time out and/or loss of a privilege for a short period of time will be used to help correct a negative behavior. Also 2nd grade and up use the demerit system. We do not spank or physically touch children in any way.

Our emphasis is on a positive environment: where there is praise, prayer, encouragement, sensitivity, respect, and most of all love that cares.

If there is an incident, the teacher will send a discipline report to the parents that day. If there is a very serious matter, the teacher will call one of the parents.

We believe that the training your child receives at home, at church, and at school will mold his/her character for the rest of his/her life. With God's help, and partnering together, we can be assured that the very best is being done for your child.

Thank you for allowing us to be an integral part of your child's life.

We have read the Philosophy of Discipline and hereby agree to its terms:

Parent/Guardian's Signature

Date

Parent/Guardian's Signature

Date