	^	
Payment Method (circle one):		Application Received:
Facts Account (withdraw next business day)	BETH HAVEN CHRISTIAN SCHOOL 5515 Johnsontown Road-Louisville, KY 40272	
Credit Card (authorization form attached)	(502) 937-3516 Phone (502)937-3364 Fax www.BethHaven.com	
Check #	2023-2024 Re-enrollment Form	
Student Information		
Student's Legal Name		
Last	First M	iddle
Student's Preferred Name:		
Student's Birth Date:	Race:Sex: Grade applying for	r:
Home Address:		
City:	State: Zip Code:	
Student lives with:		
Student's Home Phone#	Student's Cell Phone#	
Student E-Mail Address:		·
Church student attends:	Religious affiliation:	
Parent/Guardian Inf	ormation	
Father	Occupation	
Father's Employer:	Father's Work #	
Father's Cell #:	Father's Home #	
Father's Address:		
	ied to student's mother Widowed Divorced R	
Church father attends:	Religious affiliation:	
Mother	Occupation	
Mother's Employer:	Mother's Work #	
	Mother's Home #	
	ied to student's father Widowed Divorced Re	
	Religious affiliation:	-
endren mother attenus		

lease provide court documentation if applicable:	
Medical Information	
Allergies School needs to be aware of:	
Other medical needs (please explain):	
Emergency Contacts (othe	er than parent/guardian)
Name	Relationship to student
Phone Number(s)	Relationship to student
Phone Number(s)	Relationship to student
Phone Number(s)	Relationship to student
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hone Number(s)	
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nformation including, but	not limited to, grades, discipline,
nformation including, but attendance, communication	not limited to, grades, discipline,
nformation including, but attendance, communication anyone who remits payme	not limited to, grades, discipline, ons, etc. with BHCS Staff. You must includ ent on behalf of the student.
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Anformation including, but attendance, communication anyone who remits payme Name	a not limited to, grades, discipline, ons, etc. with BHCS Staff. You must includ ent on behalf of the student.
Anformation including, but attendance, communication anyone who remits payme Name	tion provided on the preceding pages is correct and agree to notif

Mission Statement

Beth Haven Christian School, in partnership with families, exists to cultivate Christian leaders who seek to impact their world for the Lord Jesus Christ through academic excellence and spiritual development.

Statement of Faith

- 1. We believe in the verbal inspiration and authority of the Scriptures. We believe that the Bible reveals God, the fall of man, the way of salvation, and God's plan and purpose for the ages.
- 2. We believe that there is one God, eternally existent in three persons: the Father, the Son, and the Holy Spirit.
- 3. We believe in the deity and virgin birth of our Lord Jesus Christ, in His sinless life, in His miracles, in His vicarious and atoning death through His shed blood, in His bodily resurrection, and in His ascension to the right hand of the Father.
- 4. We believe in the visible, personal, and pre-millennial return of Jesus Christ.
- 5. We believe that salvation is "by grace," plus or minus nothing. The conditions to salvation are repentance and faith in Jesus Christ.
- 6. We believe that man is sinful and is thereby separated from God. He is justified by faith alone and accounted righteous before God only through the merit of our Lord and Savior, Jesus Christ.
- 7. We believe God created the sacrament of marriage to be the union of one man and one woman and is a reflection of Christ's relationship to His church. (Eph.5:25-27, Matt. 19:4-6, Lev. 18:22)
- 8. We believe in the resurrection of both the saved and the lost; the saved unto the resurrection of life, and the lost unto the resurrection of damnation.
- 9. We believe in the eternal security of the believer in Christ.
- 10. We believe in the local church with the ordinances of baptism by immersion and the Lord's Supper.

I/we have read and do support Beth Haven Christian School's Statement of Faith and Mission Statement and commit to all the information in this document.

Father's Signature_____

Mother's Signature_____

Other Parent/Guardian Signature_____

Beth Haven Christian School– FINANCIAL SCHEDULE

Please indicate your choice below for BHCS Tuition Payment Method:

1- Single Payment. The student's tuition may be paid in full. Families who choose this option will receive a 5% discount on tuition only. This option is available until June 30, 2023

2- Monthly Payments – The student's tuition payments are made through FACTS Management Company monthly JUNE 2023 thru MAY 2024. FACTS charges an annual fee to set up the account.

 Registration Fee:* February 13-28, 2023: March 1-June 30, 2023: After June 30, 2023:

\$175/Child \$275/Child \$375/Child

- Pre-admission Testing Fee: \$50
- Parking Fee: \$25 due August 25, 2023 (for students who drive to school)
- Kindergarten Graduation Fee: \$50 due March 1, 2024
- Junior Class Fee: \$75 due March 1, 2024
- Senior Graduation/Class Fee: \$200 due March 1, 2024
- Sports Fee: per sport due before first game High School-\$125 (\$250 annual max per student) Middle School-\$50; Elementary-\$35
- Supply Fee: \$25 per student due June 30, 2023
- Technology Fee due June 30, 2023 Elementary \$50 per student Middle/High School \$100 per student
- Required Chromebook Purchase Middle/High School: All Students in Grades 6-12 must purchase a chrome book from BHCS \$290.00 (with good care, should last 3-4 years) Due June 30, 2023
- Returned check charge \$35.00
- *All fees are non-refundable

2023-2024	
Grade Level	Tuition/Book Fee*
К5	\$5,600
1 st -5 th	\$6,150
6 th -8 th	\$6,650
9 th -12 th	\$6,950
\$700 2 nd & 3 rd child discount will be applied	

Annual Fund Fee: \$400 per family** BHCS does not solicit state or federal government funds of any type. Therefore, taxdeductible contributions of \$400 per family are needed to meet the financial goals of the school. This fee is due June 30, 2023. This fee must be paid before the student will be allowed to attend classes. **Annual fund fee is nonrefundable

At times during the school year, special events or extracurricular items/activities will involve additional expenses. Most of these extra expenses will be optional, and every effort will be made to keep them to a minimum.

Please note that two background checks per family are included in tuition. Please submit the form with the re-enrollment form.

Please circle if applicable:

Full-time pastor

Beth Haven alumni

If referred by a current family, please name:

****EARLY BIRD DISCOUNT:

If application, registration fee, and signed promissory note are received, and a FACTS account is created on or before February 28, 2023, a \$250 tuition discount will apply.

I have read and fully understand that by registering my student(s), I am responsible for all tuition and fees as set forth above and on the following page. This includes the commitment to purchase a Chromebook from BHCS for students in grades 6-12. All tuition and fees are non-refundable except as outlined in item 5 of the promissory note.

Responsible Party Signature

BHCS Signature

Beth Haven Christian School 2023-2024 – PROMISSORY NOTE

On or before Maturity Date, the value received, the sum of \$ ______, for tuition/book fees and other valuable considerations receipt of which are hereby acknowledged, without interest. It is understood and agreed that the Student's continued enrollment at BHCS is conditioned upon the faithful performance of the terms and conditions of this note. It is further understood and agreed that this note is subject to the following terms and conditions:

- 1. Monthly payments will be due on the 5th or 20th of each month. If a payment is late, it will be subject to a 33% late charge.
- 2. Should a payment become **31 days past due**, the Student will be prohibited from attending school until satisfactory payment arrangements have been made. If the file is sent to our Attorney for collection, it is understood and agreed that the Student and/or the Student's Parents will be responsible for the full amount of the tuition due as well as the full amount of the Attorney Fees, all Court costs, etc.
- 3. Any past due account will be reported to the appropriate Consumer Reporting Agencies, Credit Bureaus, etc.
- 4. Because of the hiring of teachers and staff and the ordering of textbooks and other classroom materials are based upon enrollment, withdrawals are subject to the following obligation:
 - Withdrawals after June 1 one-month's tuition is due
 - Withdrawals after July 1

two-months' tuition is due

• Withdrawals after August 1

Withdrawals after the start of school

- three-months' tuition is due
- full year's tuition due

Parent initial

- 5. If there are extenuating circumstances (loss of job, sickness/health crisis, etc) that prevent paying the payments due and/or on time, the responsible party must contact the Business Office to explain the situation and to make mutually satisfactory arrangement. All requested payment abatement arrangements are subject to the approval and at the sole discretion of the School Board.
- 6. Student records will not be released and no credit for a student's work can be earned unless all financial obligations are met.

I/We have read and fully understand the payment responsibilities agreed to by signing this Note and that I/We are fully responsible for payment of all tuition, fees, books, Attorney and Collection fees, etc. that may be connected to the same.

Responsible Party Signature	Date	BHCS Signature	Date
Print Name	Date	Print Name	Date
*Eailure by the Note Holder to	evercise any onti	on hereunder shall not constitute a	waiver of the right

he Note Holder to exercise any option hereunder shall not constitute a waiver of the right to exercise such options for any subsequent violations of this agreement.



2023-2024 EMERGENCY STUDENT INFORMATION FORM

Student's Name	Grade:
Emergency Contacts (school office will contact in case of illness	s or emergency)
Mother :	Phone:
Father :	Phone:
Name/relationship:	Phone:
Name/relationship:	Phone:
Other than the above emergency contacts, please list persons a	uthorized to pick up your student:
Name/relationship:	Phone:
Name/relationship:	Phone:
Name/relationship:	Phone:
Grades K-5 ONLY: Please indicate if your student will be picked PICK UP EXTENDED CARE	up after school or go to extended care:
Please list any information regarding allergies, medical conditions, custody issues, etc.	learning difficulties, behavioral issues,
By signing below, I agree that all information provided is corre in writing with any updates/changes to the information provide	
Parent Signature	Date

Printed Name



AOC-RU-007 Rev. 4-08 Page 1 of 1 Commonwealth of Kentucky Court of Justice www.courts.ky.gov records@kycourts.net KRS 17.160



YOUTH LEADER REQUEST

MAIL REQUESTS TO: ADMINISTRATIVE OFFICE OF THE COURTS RECORDS UNIT 100 MILLCREEK PARK FRANKFORT, KENTUCKY 40601 502- 573-1682 or 800-928-6381

The process to obtain the information contained in CourtNet is as follows:

Please fill in ALL information below and return this form to the school office.

FAILURE TO COMPLY WITH THESE PROCEDURES WILL RESULT IN THE REQUEST BEING

RETURNED UNPROCESSED. If you suspect information contained on the record is incorrect, or have questions, please contact the Records Unit at (502)-573-1682 or (800) 928-6381.

PLEASE **PRINT OR TYPE** THE INDIVIDUALS INFORMATION **CLEARLY.**

SOCIAL SECURITY NUMBER:	_ DLN:
NAME:	
MAIDEN NAME (S) AND/OR ALIAS:	
DATE OF BIRTH:	
STREET ADDRESS/PO BOX:	
CITY, STATE, ZIP CODE:	

I understand that failure to accurately provide the information requested may result in my prosecution under K.R.S. 523.100. I have provided the basic information necessary to quality for record processing.



AOC-RU-007 Rev. 4-08 Page 1 of 1 Commonwealth of Kentucky Court of Justice www.courts.ky.gov records@kycourts.net KRS 17.160



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BETH HAVEN CHRISTIAN SCHOOL
Credit Card Payment Agreement I agree for Beth Haven Christian School to charge the following on my card for (please circle):
Pre-Admission Testing Registration Annual Fund Supply Fee Technology Fee Chromebook Other
Amount: <u>\$</u>
Processing Date:
Name on Card
Student Name
Credit Card Number
Security CVS code Expiration Date Zip Code
Email address:
SignatureDate