



# Bell Shoals

BAPTIST ACADEMY

<b>Please check all that apply:</b>	
Returning student	_____
New student	_____
Has older BSBA sibling	_____
BSBA/BSBC staff	_____

## **VPK ONLY**

### ***2017-2018 FINANCIAL CONTRACT***

I/We the parent(s), \_\_\_\_\_,  
agree to enroll \_\_\_\_\_ for the upcoming  
school year.

\_\_\_\_\_ VPK Only (5 1/2 days; 8:15-12:15; **(Aug.-dates TBD)**)

\_\_\_\_\_ Voucher received

**We understand that if the student is transferred or withdrawn from school for any reason, we will notify the school thirty days prior in writing. Parents must submit a written withdrawal notification and submit it to the Academy office.**

**THE SIGNATURE OF EACH STUDENT’S PARENT OR GUARDIAN IS REQUIRED.**

SIGNED: \_\_\_\_\_  
Father or Legal Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Mother or Legal Guardian

\_\_\_\_\_  
Date