



Faith Baptist School

4105 Plank Road | Fredericksburg, VA 22407 | 540-786-4953
www.faithva.school

Dear Prospective Parent/Guardian,

Welcome to Faith Baptist School. We understand choosing an educational institution for your family is a significant decision, and we are excited that you are considering us. If you have not already had a tour of our school, please email or call the school office to set up an appointment. We would love to introduce you to our school family and give you the chance to meet with a member of our administrative team.

Upon notification of an available spot for your child/children, please complete and submit the following to the **Finance Office**:

- Non-refundable registration fee (per student)
- New Family Enrollment Application which includes a New Family Tuition Management System form and a New Student application for your oldest child
- New Student Application (per each new sibling, if applicable)
- Birth certificate (copy)
- Court-ordered child custody decrees (if applicable)
- Educational testing, IEPs and/or psychological evaluation reports (if applicable)
- Immunization records (current) or notarized Religious Exemption Form*
- Please note there are specific immunization requirements for rising Kindergarten, 7th grade and 12th grade students.***
- MAT Written Medical Consent Form* (if applicable)
- Virginia School Entrance Health Form*

* See Supplemental forms on the Admissions page at faithva.school

Once the above items are received, we will schedule your new student testing appointment. One of our principals will review the test results with you.

Please feel free to email or call the school office if you have any questions.

Sincerely,

Jonathan Raines

Jonathan Raines
Administrator

The mission of Faith Baptist School is to nurture the hearts and minds of young people to become fully devoted followers of Jesus Christ.



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NEW FAMILY Enrollment Application (2023-2024 School Year) (Please complete ONE per FAMILY.)

Parent/Guardian 1 _____

Street Address _____

City _____ State _____ Zip _____

Employer: _____

Home		Cell	
Email		Work	

Parent/Guardian 2 _____

Street Address _____

City _____ State _____ Zip _____

Employer _____

Home		Cell	
Email		Work	

Student(s) Name (First/Middle/Last)	Grade Entering	Date of Birth
		___/___/___
		___/___/___
		___/___/___
		___/___/___

With whom does the child/do the children primarily live _____

Why would you like to enroll your child/children in Faith Baptist School?

Do you attend church regularly? (___ Yes ___ No) If Yes, which church _____

How did you hear about Faith Baptist School? _____

NEW FAMILY Tuition Management System (2023-2024 School Year)

(Please complete ONE per FAMILY.)

Part 1: Personal Information (person responsible for payment)

Name _____

Address _____

City _____ State ____ Zip _____

Student 1 _____ Grade Entering _____

Student 2 _____ Grade Entering _____

Student 3 _____ Grade Entering _____

Student 4 _____ Grade Entering _____

For office use only

Date _____

Family ID _____

Home _____

Cell _____

Work _____

Part 2: Payment Options (Please mark ONE option on the left side.)

___ Option 1: Pay full tuition of \$ _____ before August 15, 2023 (2% discount on tuition only)
Academic Fee (*per student*) must be paid before July 31, 2023.

___ Option 2: Pay 10 monthly payments of \$ _____ by ACH Debit/Credit* (Beginning in August)
Academic Fee (*per student*) must be paid before July 31, 2023.

___ Option 3: Pay 12 monthly payments of \$ _____ by ACH Debit/Credit* (Beginning in June)
(*Only available to registrations received before May 1, 2023 and includes Academic Fee*)

Part 3: Payment Authorization

Please mark monthly payment date _____ **1st of the month** _____ **15th of the month**

Please mark **ONE** method of payment _____ Checking _____ Savings _____ Debit/Credit Card

Checking/Savings Account Information: **(PLEASE ATTACH A VOIDED CHECK!)**

Bank Name _____

Routing # _____ Account # _____

Debit/Credit Card Information: (**There is a \$10 Monthly fee for tuition paid with a Debit/Credit card.*)

Circle One: Visa/ MasterCard Debit/Credit Card# _____

Expiration Date ____ / ____ Security Code (on back of card) _____

Authorized Signature (REQUIRED FOR ALL OPTIONS!)

X _____

REGISTRATION FEES ARE DUE UPON ENROLLMENT. ALL FEES ARE NON-REFUNDABLE. ALL RETURN DEBITS OR DECLINED CHARGES WILL BE ASSESSED A \$35 RETURN FEE PER OCCURRENCE.



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NEW STUDENT Application (2023-2024 School Year) (Please complete ONE per NEW STUDENT.)

Student Name _____ Grade Entering _____

- Does your child have any allergies or health concerns? (___Yes ___ No)
 - If Yes, do they require medication to be kept at school? (___Yes ___ No)
 - If Yes, a MAT Written Medical Consent Form* is due prior to your child starting school.
**See Supplemental forms on the Admissions page at faithva.school*
- Has your child ever:
 - Repeated a grade?(___Yes ___ No)
 - Been diagnosed with a learning disability, or given an IEP, 504, or behavior plan? (___Yes ___ No)
 - Been suspended from a school? (___Yes ___ No)
 - Been expelled from a school? (___Yes ___ No)
- Are there any:
 - Current custody or legal concerns? (___Yes ___ No)
 - Family/personal problems that have affected your child’s emotional development? (___Yes ___ No)

If yes for any of the above, please explain. _____

NEW STUDENT Cooperation Statement (2023-2024 School Year) (Please complete ONE per NEW STUDENT.)

Student Name _____ Grade Entering _____

- DRESS CODE & CONDUCT:** As a student of Faith Baptist School (FBS), I will abide by the Dress Code/Uniform Guidelines and Standards of Conduct/Student Behavior as given in the **FBS Parent/Student Manual 2023-2024** which I have read and understood. I agree to abide by the rules of the school and other regulations expected of each student enrolled in FBS and will not give the impression to other students, parents, or faculty that I am not in harmony with the goals, aims, or standards of the school.
- INTERNET:** I understand Internet use is a privilege, and must be in support of education and research and be consistent with the educational objectives of FBS. Unacceptable use will result in cancellation of those privileges.
- SOCIAL MEDIA:** I understand FBS will hold students accountable for information posted that violates our school polices, especially comments, posts, photographs, threats, etc., concerning the school’s students, administration, faculty and staff.
- CYBERBULLYING:** I understand Cyberbullying will not be tolerated and will be dealt with accordingly.

I have read, understand, and will abide by the stated terms and conditions. Should I commit any violation of the regulations, my access privileges may be revoked, school disciplinary action may be taken and/or appropriate legal action may be pursued against me.

Student Signature _____ Date ____/____/____

NEW PARENT/GUARDIAN Cooperation Statement (2023-2024 School Year)
(Please complete ONE per NEW STUDENT.)

Student Name _____ **Grade Entering** _____

1. In submitting an application for my child, I understand that no student is considered to be registered or enrolled until the registration fees are paid and that the school policy is to make no refunds on registrations.
2. I understand all students are accepted on a trial basis. The school reserves the right to dismiss any student whose behavior or attitude does not comply with the policies found in the **FBS Parent/Student Manual 2023-2024**. If a student is dismissed for any reason, the tuition will be prorated at the end of the current month for which the child attended.
3. I agree to pay tuition for the amount as stated on **Tuition & Fees Schedule 2023-2024**. I understand that report cards or transcripts will not be given if our account becomes delinquent during the grading period or if a satisfactory arrangement has not been made with the finance office.
4. In an effort to follow the biblical principle of handling conflict (Matthew 18), I will bring any and all questions and criticisms directly to the faculty and administration so that they may be properly considered by those in authority.
5. I understand all cell phones and personal electronic devices (e.g. iPods, tablets, etc.) must remain in the student's locker (*High School*) or Backpack (*Elementary School*) from 7:50 am until dismissal from school.
6. I understand lockers will be issued to all seventh through twelfth grade students for textbook and personal storage. Lockers should not be considered personal property and may be inspected at the discretion of the administration.
7. I give permission for my child to take part in all school activities, including sports and school-sponsored trips away from school premises and absolve the school from liability to me or my child due to any injury at school or during any school activity. In case of an accident or serious illness, I request that the school contact me. If the school is unable to contact me, the school has my full approval to contact a physician or make whatever arrangements are necessary.
8. I agree to uphold, abide by, and support the program, policies, and principles found in the **FBS Parent/Student Manual 2023-2024** and that my child will abide by the Dress Code/Uniform Guidelines and Standards of Conduct/Student Behavior stated therein and that the school administration has the right to interpret the standards and principles given in this handbook as they apply to everyday life.
9. I understand that my child's internet access is designed for educational purposes and the School Administration has taken reasonable precautions to eliminate access to controversial material. However, I also recognize it is impossible for the School Administration to restrict access to all controversial materials, and I will not hold them responsible for materials acquired on the network by my child. I hereby give my permission for my child to have access to the Internet.
10. I designate to _____ **GIVE PERMISSION** _____ **NOT GIVE PERMISSION** for Faith Baptist School to publish my child's name, photographs, and/or achievements in school or local publications, on the school website (www.faithva.school) and on promotional materials.

Parent/Guardian Signature _____ Date ____/____/____



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Pastoral Reference Form (2023-2024 School Year)
(Please complete ONE per NEW Rising 7th-12th grade STUDENT.)

Please complete this section and have your pastor complete the remainder of this form:

Student Name _____ Parent/Guardian Signature _____

Dear Pastor,

The parents of the student named above are giving you this referral form at the request of FBS. As a church ministry, our school respects your impressions and opinions regarding this student and family. Your help in this matter is vital to us. The parent/guardian signature authorizes you to give us the requested information and indicates their understanding that all responses you give are confidential and will not be discussed. They are the sole property of FBS. Would you please answer the following questions as clearly and thoroughly as possible?

The completed form can be mailed, faxed to 540-786-3380 or emailed to jonathanraines@faithva.school

This section is to be completed by your pastor:

Parents are members. Children are members.

Our records indicate their attendance as follows:

<input type="checkbox"/> Every Service	<input type="checkbox"/> Sunday Mornings Only
<input type="checkbox"/> Sundays Only	<input type="checkbox"/> Occasionally

Please provide comments about the student:

1. Salvation testimony:

2. Attitude towards spiritual growth and authority:

3. Have you known this student to use tobacco, drugs, or alcohol? (Yes No)
4. If you had a child the age of this student, would you want your child to be influenced by this student? (Yes No)
5. Any additional information that you think would influence our decision regarding accepting this student?

Pastor Signature _____ Date ____/____/____

Church Name _____ Phone Number _____



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Records Request

Student Name _____ **Grade Entering** _____

Date of Birth ____/____/____

Date of Withdrawal ____/____/____

Contact information of school last attended:

Name: _____

Address: _____

Fax#: _____ Email Address: _____

The above student is seeking enrollment in Faith Baptist School, and a copy of the following records is needed to complete the enrollment process:

- Academic records (*including Withdrawal grades*)
- Attendance information (*only if excessive absences/tardies*)
- Birth Certificate (*copy*)
- Confirmation if all financial accounts are current (____Yes ____No)
- Court-ordered child custody decrees (*if applicable*)
- Discipline records/Behavioral reports (*Please check here if there are none ____*)
- Educational testing, IEPs and/or psychological evaluation reports
- Immunization/health records
- Standardized test scores

Your prompt attention to this matter is appreciated. Please fax/email all records to my attention at 540-786-3380 or office@faithva.school (**Email is preferred.**)

Sincerely,

Jill Bridgen

School Secretary/Registrar K5-12th