

TEMPLE BAPTIST SCHOOL REENROLLMENT FORM FOR 2024-2025

<u>The Enrollment Fee is:</u> <u>\$175 for the first student</u> <u>If 2 students are enrolled: the fee is \$300 for the 2 students</u> <u>If three of more students are enrolled: the fee is \$450 for all students enrolled</u>

The fee must be paid before your child/children can be added to a class list for the coming school year.

| Student Name | | | | Grade | Enrollment Fee Paid |
|--------------|------|--------|------|------------|------------------------|
| | | | | | |
| | | | | | |
| | | | | | |
| Check | Cash | Anedot | Date | Total Paid | \$ |

By reenrolling, I am confirming again my support of Temple Baptist School as given in the application. I understand cost information is contained in the 2024-2025 tuition and fee schedule and that the school handbook contains financial and policy information. I also understand that the school reserves the right to make financial changes at any time.

I give permission for the School to contact me using any of the numbers and the e-mail addresses given to Temple Baptist School. This includes contact by the SchoolCast notification system and contact through the Renweb school management program.

| Parent's | Signature | // Date | | | | | |
|--|-------------------------|--------------------------|--|--|--|--|--|
| Please help us by providing the following info | rmation: | | | | | | |
| Mom's cell # | Dad's cell # | | | | | | |
| Mom's Email: | _ Dad's Email: | | | | | | |
| I anticipate having the North Carolina Opportunity Scholarship for 2024-2025. Date applied for Scholarship: | | | | | | | |
| I plan to pay tuition in full by September 1, 20 |)24 | | | | | | |
| I anticipate needing aftercare: | m 12:00 until | _p.m. (approximate time) | | | | | |
| Fro | om 3:00 until | _p.m. (approximate time) | | | | | |
| My child(ren) will not be returning to Temple | e Baptist School in the | fall. | | | | | |
| Finances Moving f | rom area | | | | | | |
| Other (reason) | | | | | | | |