IN CONSIDERATION OF WOODLAND BAPTIST CHRISTIAN SCHOOL ACCEPTING MY CHILD AS A STUDENT, WE AGREE TO THE FOLLOWING TERMS AND CONDITIONS:

- I herewith, authorize this school to educate my child in accordance with scriptural teachings. I will abide by the school rules concerning disciplinary measures and dress codes, as outlined in the current Woodland Baptist Christian School Handbook and the Detention and Demerit Lists.
- I hereby pledge to pay financial obligations to Woodland Baptist Christian School on the date due of each year my child is in enroll at WBCS. I also agree, voluntarily withdraw my child if my account becomes delinquent.
- I understand that the standards of Woodland Baptist Christian School do not tolerate profanity, obscenity in word or action, dishonor to the Holy Trinity and the Word of God, disrespect to the personnel of the school, pre-marital sex, or any involvement with controlled substances - particularly drugs or alcohol.
- I understand that the school has the right to accept or not accept a student as it deems advisable.

THIS IS TO CERTIFY THAT I HAVE READ THIS CONTRACT AND DO HEREBY AGREE TO ALL TERMS AND PROVISIONS AS STATED:

Signature of Pa	rent or Legal Guardian		Date
Parent comments concerr be beneficial/helpful:	ning the applicant or spe	ecial circumstances c	concerning the applicant's family that would
	FOR O	FFICE USE ON	LY:
	Accepted _	Not Accepted	Grade
Interviewer comments:			Date/
7/21			

WBCS APPLICATION FOR STUDENT ADMISSION



1175 Bethania Rural Hall Road

Winston-Salem, North Carolina 27106 Telephone: 336-969-2088 Fax: 336-969-0179

NOTE: This application does not assure final enrollment but provides information upon which a decision is based. Once the application is accepted, a non-refundable registration fee must be paid in the school office and arrangements will be made for tuition payment.

D	ATE OF APPLICATION	N		
STUDENT NAME				
	ast	First		Middle
MAILING ADDRESS				
	Street	City	State	Zip Code
	ACADEMI	C INFORMATIC	ON	
PREVIOUS SCHOOL AT	TENDED			
Street		City	State	Zip Code
PRIOR SCHOOL COUNS	ELOR'S NAME			
APPLICATION FOR GRA	ADE	LAST GRAD	DE COMPLETED	
REASON FOR APPLYIN	G TO WBCS			
DAYS ABSENT LAST SO	CHOOL YEAR	REASON IF OV	ER 5	
PRIOR ACADEMIC PERI	FORMANCE: Superior	Above Average A	Average Below Aver	rage Failing
HAS APPLICANT HAD A	ANY SERIOUS DISCIPI	LINE PROBLEMS?	(If YES, exp	olain)

PERSONAL DATA

SSN#	Date of Birth	Birthplace
Age Sex Condi	tion of Health	
Allergies	1	Indicate if Asthmatic, etc
Physical / Learning Disabilities		
How did you hear about WBCS	5?	
	SPIRITUAL	INFORMATION
Church Student Attends		
Regular Attender? Yes	No Is	Student a born-again believer? Yes No
Where do Parents attend Churc	h? Mother	
	Father	
		NFORMATION Names of Birth Parents)
Father		Mother
Home Phone Number		Home Phone Number
Cell Phone Number		Cell Phone Number
E-mail		E-mail
Marital Status: Married	Separated	Divorced Single Parent
Legal Guardian(s) / Stepparente	(s)	
Other Children in Family: (Plea	ase list Name, Age, an	nd School Attending)

REFERENCES

- PLEASE INDICATE YOUR PASTOR AS A REFERENCE -

NAM			
IVAIV	1E	ADDRESS	TELEPHONE
NAM	ME	ADDRESS	TELEPHONE
NAM	1E	ADDRESS	TELEPHONE
		DAY CARE SERVICES	
	WILL YOU NE	ED BEFORE OR AFTER SCHOOL DA	AY CARE SERVICES?
	_	Before School Afte	r School
	,	TUITION ARRANGEMENT	
PARENT SI	GNATURE	TUITION ARRANGEMENT	ŗ
PARENT SI	GNATURE	TUITION ARRANGEMENT PAY MY CHILD'S TUITION AS INDICA	T ATED BELOW:
PARENT SI	GNATURE	TUITION ARRANGEMENT	ATED BELOW: e first day of school. There is a 5%
PARENT SI	GNATURE	TUITION ARRANGEMENT PAY MY CHILD'S TUITION AS INDICATE Full Payment (tuition and fees) before the	ATED BELOW: e first day of school. There is a 5% yment choice. nt (tuition and fees) due before the

PAYMENTS MUST BE MADE BY THE DUE DATE OR THE STUDENT WILL BE WITHDRAWN FROM SCHOOL!