

First Baptist School

501 W Mustang
PO Box 687
Caldwell, Texas 77836
979-567-3771



FIRST BAPTIST SCHOOL ENROLLMENT PACKET

2025-2026

****PLEASE COMPLETE AND SUBMIT THE ENTIRE PACKET****

Ways to submit:

Email: admin@fbscaldwell.org
Mail: PO Box 687, Caldwell, Texas 77836
Fax: 979-567-9267
Drop off at front office

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GRADE ENROLLING IN (please circle)					
Wee 3s		or	Pre-K		
MWF All Day	MWF Half Day	M-F All Day	M-F Half Day		
10 months		or	12 months		
K	1 st	2 nd	3 rd	4 th	5 th

STUDENT ENROLLMENT | PART 1

Student Information

Full Name: _____ Gender: Male Female
Last First Middle

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Date of Birth _____ Social Security No: _____

Staying for After School Program: Yes No If yes, : M-F MWF AS NEEDED

Parent Information

Father's Name: _____ Phone: _____
Last First

Address: _____
Street Address (if different from student's) Apartment/Unit #

City State ZIP Code

Employer: _____ Work Phone : _____

Email: _____

Mother's Name: _____ Phone: _____
Last First

Address: _____
Street Address (if different from student's) Apartment/Unit #

City State ZIP Code

Employer: _____ Work Phone: _____

Email: _____



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STUDENT ENROLLMENT | PART 2

Family Information

Legal last name if different from above: _____

Legal Guardian if child not living with parents: _____ Phone: _____

Address: _____
Street Address (if different from student's) Apartment/Unit #
City State ZIP Code

Employer: _____ Work Phone: _____

If parents are divorced or separated, please indicate custodial parent: _____

Siblings Names: _____ Age / Grade: _____
Siblings Names: _____ Age / Grade: _____
Siblings Names: _____ Age / Grade: _____
Siblings Names: _____ Age / Grade: _____

Church Affiliation

Family Attends: _____

Member: YES NO

Policy of Non-Discrimination

First Baptist School affirms its non-discriminatory admissions policy and further declares that all privileges, programs, scholarships, and activities associated with the school are made equally available to all students enrolled, regardless of race, color, and national or ethnic origin.

I hereby apply for a place for my child named above for the school year: _____

Signature: _____ Date: _____



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STUDENT ENROLLMENT | PART 3 | AFTER SCHOOL PROGRAM

After School Program Enrollment

If you plan to utilize the After School Program (3:25p - 5:45p) Please complete the form below.
After School Program is included in the All Day Wee 3 and Pre-K tuition HOWEVER, we still require the form to be completed if your child will be attending.

Student Name: _____ Grade: _____

I am enrolling my child in After School Care.

Please choose
an option:

M-F
 As Needed

Billed the Monthly Rate*
Billed the Hourly Rate*

**See Rate Sheet*

After School Program Pick Up Procedures:

Wee 3 & Pre K:

- 3pm – 4pm pick up children by the playground located behind the school
- 4pm – 5:45pm pick up children at their door located at the front of the school

Kindergarten – 5th Grade:

- Pick up at the playground or lunch room located behind the school

ALL STUDENTS MUST BE PICKED UP BY 5:45PM OR LATE FEE WILL BE ASSESSED.

Late Fee:

- \$1/minute for each minute after 5:45PM that the child is picked up.

By signing below, you understand that your child(ren) MUST BE PICKED UP BY 5:45PM. Failure to comply will result in additional fees.

Signature: _____ Date: _____





EMERGENCY FORM

EMERGENCY CONTACT INFORMATION

Student's Name: _____	Grade Enrolled In: _____
Date of Birth: _____	
Address: _____	
_____ Street Address	_____ City State _____ Zip Code
PARENT / GUARDIAN:	
Father's Name: _____	Cell Phone: _____
Email: _____	Work Phone: _____
Mother's Name: _____	Cell Phone: _____
Email: _____	Work Phone: _____

IN CASE OF AN EMERGENCY IN WHICH PARENTS CANNOT BE REACHED PLEASE CALL:

Name: _____ Phone: _____
Relationship to Child: _____

Name: _____ Phone: _____
Relationship to Child: _____

EMERGENCY CARE: In the event I cannot be reached or make arrangements for emergency medical attention at the time of illness or accident, I hereby authorize the person in charge to transport my child to the nearest medical facility. I give consent for this facility to secure any and all necessary emergency medical care for my child.

Signature: _____ Date: _____

Family Physician: _____ Phone: _____

Address: _____

Allergic to: _____

List Any Special Problems that your child may have, such as existing illness, previous serious illness, injuries and hospitalizations during the past 12 months, and any other information caregiver's should be aware of:

Daily Medications taken by child: _____

RELEASE FORM: When a child is brought to the school facility he/she must be left in the presence of a staff member. You must make a staff member aware of your child's departure. **Our staff will assume your child may be released to either parent unless legal documents in our office state otherwise.** I hereby authorize FBS to release my child only to those listed below unless specific notification is given:

Name & Phone: _____

Name & Phone: _____

Name & Phone: _____

FIELD TRIP PERMISSION: I hereby give do not give permission for my child to participate in any off campus field trips during the school year. I understand that private automobiles, vans, and church transportation may be used. I understand that all safety measures will be taken.

WATER ACTIVITIES: I hereby give do not give consent for my child to participate in the following water activities; water table, sprinkler play, splashing/wading pools, swimming pools, aquatic playgrounds.

FOOD ALLERGIES: Has your child been **diagnosed** with any food allergies? yes no Plan in place from doctor: _____

If your child has asthma and requires an inhaler, a plan of action is required from the doctor.

Signature: _____ Date: _____



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AUTOMATIC PAYMENT AUTHORIZATION FORM

CREDIT CARD / ACH AUTHORIZATION FORM

Automatic payments are not required but optional. If you would like ENROLLMENT FEES and/or TUITION processed through your credit card or bank account each month, please complete the following:

Please select which option you wish to pay with:

Credit Card Bank Account

CREDIT CARD INFORMATION

Student's Name: _____

Credit Card Number: _____

CVV: _____ Expiration Date: _____

Please Circle: DEBIT / CREDIT

*A \$10 fee will be added to all CREDIT transactions.
Please consider using ACH for payments to help lower the cost of processing fees for the school.*

ACH INFORMATION

Bank Name & Phone #: _____

Bank Routing Number: _____

Account Type & Number: _____

Enrollment Fee Amount: \$ _____

Desired Process Date: _____
MM-DD

Tuition Amount: \$ _____

What day of each month do you wish the tuition to be processed?
_____ (1st, 5th, 10th, or 15th)

Signature: _____

Date: _____



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ACKNOWLEDGMENT OF SCHOOL POLICIES

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The First Baptist School Handbook is designed to better inform you of the school's policies and activities. We do not consider it to be all-inclusive and as issues arise, they will be dealt with individually. Please read it carefully and keep it for future reference. If you have any questions, do not hesitate to come by or call.

The staff of FBS is eager to work with you in every way. Our concern, as is yours, is to provide a quality Christian education for all children. We hope you will participate in our various activities throughout the year. Let's make it the best for the children.

Together we can,

Administrator
First Baptist School

I have read the handbook (online version is at www.fbscaldwell.org) and I understand the policies of First Baptist School.

Student's Name: _____

Parent's Name:
(printed) _____

Signature: _____

Date: _____

I request a hard copy of the handbook to be sent home with my child



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TUITION PAYMENT OPTIONS

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Please select which Tuition Payment Option you wish to apply to your child's tuition for the entire year:

- Option A Option B

OPTION A: TUITION DUE ON THE 1ST OF THE MONTH

Tuition is due on the first day of each month starting in August. A payment is considered late if not received by the 15th and will be assessed a late fee of \$50.00.

OPTION B: 50% OF THE MONTH'S TUITION DUE ON THE 1ST 50% OF THE MONTH'S TUITION DUE ON THE 15TH

- Tuition payments will be due on the 1st of each month and the 15th of each month starting in August.
- The tuition will be split 50/50 between these two payments.
- A \$25 late fee will be assessed on the 15th if the first payment is not received by the 14th.
- A \$25 late fee will be assessed on the 1st of the following month if the second payment is not received by the final day of the month.

FORMS OF PAYMENT

First Baptist School will accept the following forms of payment: Cash, Cashier's Check, Personal/Business Check, Debit Card, Credit Card, ACH payment. *(Be sure to complete the authorization form if using a card or ACH payment)*

- Credit Card transaction will be assessed a \$10 fee per transaction.
- Returned Checks will be assessed a \$10 fee.
 - After 2 returned checks, you will no longer be permitted to pay by check and required to use another form of payment.

Parent Signature: _____

Date: _____



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PAST DUE TUITION POLICY

PAST DUE TUITION POLICY

Any tuition payments are applied to the oldest balance due.

In order to enroll in FBS Summer Program or the FBS School Year all student balances must be current.*

OPTION A PAST DUE PROCESS: The following process will be followed at minimum when a student's tuition is deemed late.

- Day 1 → Tuition due
- Day 16 → \$50 Late Fee added. Financial Secretary sends an invoice directly from Quickbooks and confirms receipt and understanding with a phone call. The School Administrator and/or Preschool Director will send an email to all email addresses listed on the enrollment form.
- Last Day → Quickbook Invoice re-sent by Financial Secretary and School Administrator and/or Preschool
Of Month Director to follow-up via email / call.
- Day 45 → Notification via email from Financial Secretary advising of 15 days to meet with the First Baptist School Board to present a written plan for payment and discuss the delinquent tuition. If the plan is not agreed to, the student will be automatically dismissed from First Baptist School at the 2 month mark (day 60).
- Day 60 → If FBS Board has not approved the written plan for payment and continued enrollment, the student is automatically dismissed from First Baptist School.

OPTION B PAST DUE PROCESS: The following process will be followed at minimum when a student's tuition is deemed late.

- Day 1 → 50% of Tuition due
- Day 15 → \$25 Late Fee added. Financial Secretary sends an invoice directly from Quickbooks and confirms receipt and understanding with a phone call. The School Administrator and/or Preschool Director will send an email to all email addresses listed on the enrollment form.
- Day 15 → 50% of Tuition Due
- Last Day → \$25 Late Fee added. Financial Secretary sends an invoice directly from Quickbooks and confirms
of Month receipt and understanding with a phone call. The School Administrator and/or Preschool Director will send an email to all email addresses listed on the enrollment form.
- Day 45 → Notification via email from Financial Secretary advising of 15 days to meet with the First Baptist School Board to present a written plan for payment and discuss the delinquent tuition. If the plan is not agreed to, the student will be automatically dismissed from First Baptist School at the 2 month mark (day 60).
- Day 60 → If FBS Board has not approved the written plan for payment and continued enrollment, the student is automatically dismissed from First Baptist School.

Non-Compliance of the approved written plan for payment may result in a 15 day dismissal letter being sent to the responsible party.

Account Receivable Report and update on all approved written plans will be a standing agenda item on the School Board Agenda.

**Any past due balances within the prior 5 years are required to be paid current prior to enrollment.*

Parent Signature: _____

Date: _____





INTERNET USE RELEASE FORM

ELECTRONIC DEVICE POLICY

Electronic Device Policy is section 33 from Parent-Student Handbook.

Electronic devices (including but not limited to cell phones, laptops, e-readers, tablets, Bluetooth devices or any device that can make or receive calls or texts) are required to be on silent mode and are not permitted to be out of student's backpacks while on campus or at extracurricular activities. These devices are not allowed to be out of backpacks before or after school while on a student is on campus without prior permission. Electronic devices such as watches that are designed to be worn (including but not limited to smart watches, Fitbit watches) are permitted to be worn while on campus and at extracurricular activities, however they are only allowed to be used to tell time.

All violations of the Electronic Device Policy will be reported to the Administrator and documented in the student's file.

CONSEQUENCES:

Warning: If a student's cell phone or other device is not on silent mode and is heard ringing while enclosed in a student's backpack, the student will receive a warning and will be required to silence the cell phone. The student's parent will be notified and the student's file will be documented. If a second incident occurs the student will move to 1st Offense discipline.

If a student is in violation of this policy the following discipline will be administered. In addition, the electronic device will be IMMEDIATELY confiscated, turned into the Administrator, and the parents will be notified of the violation.

1st Offense	2 Mandatory D-Halls and \$20 fine
2nd Offense	4 Mandatory D-Halls and \$40 fine
3rd Offense	Same day ISS and a Mandatory Suspension the following school day
4th Offense	First Baptist School Board will review and determine consequence

FINES:

All fines are required to be paid BY THE PARENT, IN THE OFFICE before the electronic device will be released to the parent. Students are not allowed to pay the fine or pick up the electronic device once confiscated.

I have read, understand and consent to the above mentioned policy, consequences, and fines.

Parent
Signature: _____ Date: _____

Student Signature required if student is 1st grade or up.

Student
Signature: _____ Date: _____



DISCIPLINE AND GUIDANCE POLICY

DISCIPLINE AND GUIDANCE POLICY

Discipline must be:

- (1) Individualized and consistent for each child;
- (2) Appropriate to the child's level of understanding;
- and (3) Directed toward teaching the child acceptable behavior and self-control.

A caregiver may only use positive methods of discipline and guidance that encourage self-esteem, self-control, and self-direction, which include at least the following:

- (1) Using praise and encouragement of good behavior instead of focusing only upon unacceptable behavior;
- (2) Reminding a child of behavior expectations daily by using clear, positive statements;
- (3) Redirecting behavior using positive statements; and
- (4) Using brief supervised separation or time out from the group, when appropriate for the child's age and development, which is limited to no more than one minute per year of the child's age.

There must be no harsh, cruel, or unusual treatment of any child. The following types of discipline and guidance are prohibited:

- (1) Corporal punishment or threats of corporal punishment;
- (2) Punishment associated with food, naps, or toilet training;
- (3) Pinching, shaking, or biting a child;
- (4) Hitting a child with a hand or instrument;
- (5) Putting anything in or on a child's mouth;
- (6) Humiliating, ridiculing, rejecting, or yelling at a child;
- (7) Subjecting a child to harsh, abusive, or profane language;
- (8) Placing a child in a locked or dark room, bathroom, or closet with the door closed; and
- (9) Requiring a child to remain silent or inactive for inappropriately long periods of time for the child's age.

My signature verifies I have read and received a copy of this discipline and guidance policy.

Parent Signature: _____ Date: _____

For specific discipline guidelines please review *The Honor Code*, *Student Expectations*, and the *Disciplinary Consequences* which are all contained in the Parent-Student Handbook.



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HONOR CODE | PAGE 1

HONOR CODE / EXPECTATIONS

By God's grace and for God's glory, it is our belief that our students' behavior, whether on or off campus, should honor God, family, peers, and First Baptist School with their words, their actions, their heart, and their mind.

Student Expectations:

1. Treat others kindly in words and actions to create a community of mutual respect.
2. Roughhousing can result in unintentional harm; therefore, to maintain a safe and secure environment, none will be allowed. Students are expected to refrain from physical interference such as tripping, poking, hitting, and the like.
3. Appropriate response to authority is critical to the shaping of a student's life in every way. Students must instantly obey and exhibit respect toward teachers, the school's staff, and its supporting adults, thereby avoiding a display of negativism of tone, body language, and attitude.
4. Words have an integrity of their own, and God expects man to be a steward of thoughts and expressions. Students will refrain at all times from language which is vulgar and inappropriate, and which demeans either God or others.
5. Students may have food in designated eating areas only. Chewing gum is not permitted on campus or at extracurricular activities.
6. Electronic devices (including but not limited to cell phones, laptops, smart watches, E-readers, tablets, or any device that can make or receive calls or texts) are not permitted.
7. Students should protect the property rights of others and refrain from meddling with the personal or assigned property of others.
8. Clean, neat, and wholesome surroundings contribute to the educational environment of everyone. Students should do all in their power to keep themselves, the school and its campus neat and clean; they should avoid destruction or defacement of school property in any form.
9. Students should remain only in authorized areas of the building or grounds.
10. Students should walk quietly and in an orderly manner between locations. (This includes in the hallway, walking to Chapel, going to recess, and going to lunch.
11. Since the school cares about the health and well-being of its students, the possession or use of drugs, alcohol, vaping and tobacco products, or weapon on campus is forbidden.
12. Since the school desires to eliminate distracting behavior while promoting mutual respect, students will refrain from public displays of affection or dislike.
13. Students will be prompt in their arrival to class and for other school events.
14. Students will exhibit honesty in all their dealings with the staff and students of the school and during any activities.
15. The above Student Expectations also apply to online learning and virtual classrooms.

The school, as needful and advisable, may add to or refine the above Student Expectations in the best interests of the students and mission of the school. Students who violate the spirit of this Honor Code will be subject to counsel and disciplinary action.

Student Expectations are to be observed on campus, on field trips, and while attending Games.

Parents / Adults attending functions or present at school are expected to follow the guidelines for student expectations as well; as we are role models and examples for Christ everywhere we go.

Parent Signature: _____ Date: _____

Student Signature: _____ Date: _____

Student Signature required if student is 3RD GRADE AND UP



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HONOR CODE | PAGE 2

HONOR CODE / DISCIPLINARY ACTIONS

The follow steps outline the disciplinary action plan that will be followed as violations to the Honor Code occur:

- 1st Violation Action Taken: Warning and Phone Call Home
- 2nd Violation Action Taken: After School Detention 2 to 4 Days (*After this action contact parent to inform them that the next step will be ISS and parents will be responsible to pay for the ISS sub.*)
- 3rd Violation Action Taken: In House Suspension
- 4th Violation Action Taken: Suspension 2 days
- 5th Violation Action Taken: Parents and student meet with the School Board

- Major Offenses: Automatic Suspension until the FBS Board meets with parents and students. Offenses that may fall in this category are listed below and others may apply:
 - Fighting
 - Threat
 - Vandalism; damaging property
 - Going on a site or downloading explicit material
 - Cheating
 - Plagiarism
 - Drugs or alcohol
 - Weapons
 - Vaping or Tobacco Products
 - Stealing
 - Lying to hurt others
 - Viewing or exposing others to inappropriate pictures and/or inappropriate content (Must involve the police)





FBS COLLECTIVE COMPACT

FBS COLLECTIVE COMPACT

STUDENT: I realize that my education is important. I am the one responsible for my own success. Therefore, I agree to carry out the following responsibilities to the best of my ability (sign at the bottom of the page):

- Be on time for class every day, with all necessary supplies
- Complete & return my homework on time, having given it my best effort
- Discuss my school day, work & behavior with my parents daily
- Accept responsibility for my own behavior & learning, following all school rules
- Be safe, respectful, responsible, & honest at all times, never tolerating any type of bullying
- Pay attention in class & ask for help when needed

PARENT/GUARDIAN: I understand that my participation in my student's education will positively impact his/her achievement & attitude. Therefore, I will continue to carry out the following responsibilities to the best of my ability (sign at the bottom of the page):

- Check for school communications daily & reply/return items promptly when requested
- Attend plays/programs, parent-teacher conferences, Meet the Teacher, & other school events
- Provide a quiet time/place for my student to do homework
- Review/help with homework, as well as studying for tests/quizzes
- Discuss my student's day, school work & progress with him/her
- Make sure my student gets adequate sleep, has a healthy diet, & attends school each day when in good health
- Support the school's homework, discipline & attendance policies, contacting the teacher with any concerns
- Follow the complaint procedure on page 25 of the Parent/Student Handbook

TEACHER: I understand the importance of the school experience to every student & my role as an educator & role model. Therefore, I agree to carry out the following responsibilities to the best of my ability (sign below):

- Teach the approved curriculum, employing various instructional strategies to support student achievement & interest
- Grow professionally, seeking innovative ways to teach my class & maintain discipline
- Strive to address the individual needs of my students as they align with school policy
- Communicate with parents regarding their student's progress via email and/or phone, conduct sheets, & progress report
- Provide a safe, positive & disciplined learning environment for my students
- Evaluate & return student work in a timely manner, maintaining high expectations for each student
- Effectively communicate assignment expectations

ALL: Gossip among families, teachers, or students will not be tolerated. Consequences may include, up to, dismissal of employee or expulsion of student.

Student
Signature: _____ Date: _____
Parent
Signature: _____ Date: _____
Teacher
Signature: _____ Date: _____

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MEDIA RELEASE FOR SOCIAL MEDIA AND WEBSITES

MEDIA RELEASE

As a parent/guardian of _____, I hereby consent to the use of photographs/videotape taken during the course of the school year for publicity, promotional and / or educational purposes (including publications, presentations, or broadcasts via newspaper, internet, social media, or other media sources). I do this with full knowledge and consent and waive all claims for compensation for use, or for damages.

_____ Yes, I give consent for First Baptist School to photograph or video tape my child for school purposes and/or school events.

_____ No, I do not authorize First Baptist School to photograph or video tape my child for any school purpose and/or school event.

Signature: _____

Date: _____





INTERNET USE RELEASE FORM

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Philosophy

First Baptist School has access to technology, computers, networks, and the Internet. This is a means by which students can get access to information of a truly global nature. The Internet has come about because people have chosen to network their computers in order to share information. The staff of FBS is well aware that some of this material runs contrary to the faith and morals of our school community. An extensive internet filter has been in place for years. Good judgment and Christian responsibility is expected of all students.

Terms and Conditions

- Abide by copyright law. First Baptist School does not condone and specifically forbids the unauthorized duplication of software and related documentation
- Never write or share a password!
- Never alter technology equipment unless instructed to do so.
- All network communication must be polite, kind, and free from inappropriate language and personal information.
- Electronic communications are not guaranteed to be private.
- Attempts to tamper with other people's data or gain unauthorized access to accounts or files on the network, including the Internet, is not permitted.
- Unneeded personal files shall be deleted regularly. File server space is limited.
- Parents and students will sign a Technology/Internet Usage policy before students may use school computers.

Disciplinary Action

Misuse and abuse of technology privileges (including Internet access) will result in disciplinary action. Lack of good judgment and/or Christian responsibility in the use of the technology will be just cause for serious disciplinary action which will include, but not be limited to, any of the following

- temporary suspension of technology use privileges
- denial of technology use privileges
- suspension
- action deemed appropriate by the principal

I have read, understand and consent to the above mentioned criteria.

Signature: _____

Date: _____

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NUTRITION ACKNOWLEDGMENT FORM

NUTRITION ACKNOWLEDGMENT FORM

I, _____ parent of

_____ acknowledge that FBS does not
serve hot lunches daily. I will be providing lunch for my child.

- I understand that First Baptist School does not offer refrigeration or warming of lunches.
- I understand acceptable drink options include juice, Kool-Aid, tea, and water.
- I understand that all carbonated beverages (Coke, Sprite, DP, etc) and coffee are not acceptable.
- I understand that FBS is not responsible for the nutritional value of my child's lunch or for meeting my child's daily food needs.

Milk may be purchased from the school for 75 cents per carton.

Snacks are provided by FBS as follows:

- In the Morning and Afternoon for Wee 3's and Pre-K
- In the Afternoon for Kindergarten
- For all ages during After School Program

_____ Yes, I give permission for my child to be offered milk.

_____ No, I do not give permission for my child to be offered milk.

Signature: _____

Date: _____





MEDICAL FORM

MEDICAL FORM

THIS FORM MUST BE COMPLETED AND SIGNED BY YOUR FAMILY PHYSICIAN

Student's Name _____ DOB : _____

Vision and Hearing required for 4 years old and above

VISION	R 20/ _____	L 20/ _____	<input type="checkbox"/> PASS	<input type="checkbox"/> FAIL
Signature: _____			Date : _____	

HEARING	1000 Hz	2000 Hz	4000 Hz	<input type="checkbox"/> PASS
R				
L				<input type="checkbox"/> FAIL
Signature: _____				Date : _____

List any medical problems that the teacher needs to be aware of to help this child in his/her education (limited activities, dietary restrictions, allergies, etc): _____

I have examined the child named on this form and find that he/she is able to participate in this school program

Physician
 Signature: _____ Date: _____

IMMUNIZATIONS

*****Please attach copy of Shot Record*****

Varicella (chickenpox) vaccine is not required if your child has had chickenpox disease. If your child has had chickenpox, please complete the statement: *My child had varicella disease (chickenpox) on or about the date _____ and does not need the varicella vaccine.*

Signature: _____ Date: _____

COMPLETE THE FOLLOWING ONLY IF YOU ARE EXEMPTING FROM IMMUNIZATIONS

<input type="checkbox"/>	I am excluding my child from the immunization requirements for reasons of consciences, including a religious belief. I have attached an official notarized affidavit form developed and issued by the Dept of State Health Services. I understand this affidavit is valid for 2 years.
--------------------------	--

For additional information regarding immunizations contact the Dept of State Health Services at www.dshs.state.tx.us/immunize/public.shtm

Signature: _____ Date: _____



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STATEMENT OF PARENTAL COOPERATION

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I recognize that FBS works as an extension of me, the parent, and I pledge my prayerful support to the school administration and faculty. I agree that discipline is necessary for the welfare of each student, as well as the entire school. I understand that the goal of FBS is to lead each child to a saving knowledge of the Lord Jesus Christ by providing a sound academic education which is integrated with the Word of God. FBS also believes in nurturing our children in the highest principles of Christian leadership, self-discipline, individual responsibility, personal integrity, and good citizenship. I understand discipline to be an aspect of Christian development and not a form of punishment. To this end, I hereby give permission for my child's teacher and/or other members of the school staff and administration to enforce all classroom regulations and school policies in a manner consistent with Christian principles of discipline. I also understand the Administrator, acting for the First Baptist School Board, has full authority to suspend or dismiss my son/daughter not only for his/her benefit, but for the benefit of First Baptist as a whole.

I understand that the operating expenses of a school like First Baptist School are fixed, and a loss is realized if any vacancy occurs during the school year. In support of the school's obligation to its staff, I agree to enroll my child for the entire school year. I understand that no reductions can be made for vacations, holidays, or for any other absences regardless of cause. I understand that tuition will be pro-rated in the event my child is enrolled after the school year has begun according to the actual months enrolled. In the event my child is withdrawn from the school for any reason, it is agreed that all sums of money paid to FBS SHALL BE RETAINED BY FBS. If a student is withdrawn after the first of the month, I agree to pay full tuition for that month. It is the responsibility of the parent to give written notification to the school of student withdrawal. Tuition will accrue and be payable until notification is received. I understand that tuition is due and payable over a 10 month period beginning in August or September). I understand that if tuition is not paid within 30 days of the due date I will have the opportunity to appear before the school board for any special consideration and that by the 15th of the following month my child will not be allowed to return to school. I also understand that registration fees are non-refundable.

I understand that the Administrator, at his/her discretion, may withhold report cards, transcripts of grades, diplomas, etc. due to non-payment of bills.

I am aware that FBS assumes both parents have equal access to the student and his/her permanent records unless legal documentation is filed in the school office.

I am aware that student addresses and phone numbers will be supplied to class groups unless the school office is notified otherwise in writing.

I hereby release First Baptist School of any responsibility for any accident or injury that might occur on school premises or en route to and from school or while involved in any school activity.

I understand that all students are required to abide by the school's dress code which is spelled out in our handbook.

As a family, we are committed to following the Matthew 18 principle of reconciliation. If concerns or disagreements arise over issues or incidents related to the welfare of our children, we will go to the individual involved and seek a mutually satisfactory remedy in the bonds of Christian love.

Signature: _____

Date: _____



First Baptist School
501 W Mustang
PO Box 687
Caldwell, Texas 77836
979-567-3771



POTTY TRAINING AGREEMENT | Wee 3's & Pre-k Only

POTTY TRAINING AGREEMENT

I understand it is required that all children enrolled in Wee 3's and above be potty trained. This means they will not wear diapers or pull-ups, should be able to pull their clothes up and down, and use the toilet independently. Teachers schedule in more than one toilet break per hour to assist your child during this developmental growth.

FBS understands that an occasional accident will happen, but frequent accidents will require reassessment of your child's enrollment.

Signature: _____

Date: _____



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INSECT REPELLENT PERMISSION FORM

INSECT REPELLENT PERMISSION FORM

I have initialized below applicable information as to the use of bug repellent for my child:

_____ I do **NOT** give permission for First Baptist School to apply insect repellent on my child.

_____ I give permission and have provided the following brand/type of bug repellent for use on my child, to apply on an as needed basis. (Must be in its original container and be labeled with your child's first and last name.)

Brand/Type: _____

_____ I give permission for staff to use the school's choice of insect repellent according to the directions on the products label.

Student's Name: _____

Signature: _____

Date: _____



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FIRST BAPTIST SCHOOL T-SHIRT

FBS T-SHIRT ORDER FORM

ALL students are required to have the First Baptist School Fieldtrip t-shirt (logo below). If your child does not have this t-shirt, you will be required to purchase one. The t-shirts are \$15 and the cost will be added to your Enrollment Fee.

_____ **I do** need to purchase a t-shirt for my child and understand that \$15 will be added to the Enrollment Fee for the purchase of the t-shirt.

_____ **I do NOT** need to purchase a t-shirt for my child. My child already has the designated shirt.

SIZE OPTIONS

(please mark ONLY if you plan to purchase a shirt for your child)

_____ Youth X-Small

_____ Youth Small

_____ Youth Medium

_____ Youth Large

_____ Adult Small

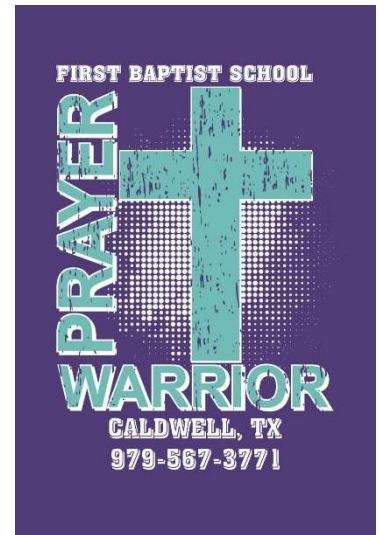
_____ Adult Medium

_____ Adult Large

_____ Adult X-Large

_____ Adult XX-Large

_____ Adult XXX-Large



If you wish to purchase additional t-shirts please contact the First Baptist School Office.

Signature: _____

Date: _____



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ADDITIONAL DOCUMENTS REQUIRED

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Additional Documents Required

First time enrolling students need the following documents:

- Copy of Birth Certificate
- Copy of Social Security Card
- Copy of Shot Record
- Letter from your physician stating that the student may attend school / daycare.

Returning students need the following documents:

- Up to date Shot Records



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STUDENT CHECKLIST

Student's Name: _____ Grade Enrolled In: _____
Last *First*

FOR INTERNAL USE ONLY

Enrollment Date: _____

Admission Date: _____

Withdrawal Date: _____

- Student Enrollment Form (3 Parts)
- Emergency Contact Form
- Credit Card Authorization Form
- Past Due Tuition Policy
- Acknowledgement of School Policies Form
- Electronic Device Policy
- Discipline and Guidance Policy
- Honor Code
- FBS Collective Compact
- Media Release Form
- Internet Use Release Form
- Nutrition Form
- Medical Form
- Statement of Parental Cooperation Form
- Potty Training Form (Wee 3 / Pre-k)
- Insect Repellent Permission Form
- Copy of Shot Record
- Copy of Birth Certificate
- Copy of Social Security Card

