

## Beacon Christian School ENROLMENT APPLICATION – JK to Gr. 8

<b>Student Information</b>	on:							
Last Name:	First Name:			Middle Name(s):				
Birthdate (mm/dd/yyyy):	Gender:				Grade Entering:			
Address:								
City: Province:				Postal Code:				
Date of Application (mm/dd/y	ууу):							
Last School Attend	led (If applicable):			DOCUM	ENTS TO SUP	PPLY:		
School Name:				<ul> <li>□ Birth certificate</li> <li>□ IEP (if applicable)</li> <li>□ Health card</li> <li>□ Payment agreement/</li> <li>□ Immunization record</li> <li>∨ Oid cheque/Bank info</li> </ul>				
JK Program Requested:		Wed Thur	s.)					
□ Afternoons+ Program – 5 mornings & 3 full days (Mon., Wed., Thurs.) SK Program Requested: □ Half Day □ Full Day				□ Previous report card (if applicable)				
□ Afternoons+ Program – 5 mornings & 3 full days (Mon., Wed., Thurs.) Bus Transportation Requested: □ No □ Yes				<ul> <li>Before/After school care application</li> <li>\$250 JK &amp; SK Non-refundable (New family only)</li> </ul>				
Both ways D Mornings or			L	LI \$500 depo	osit Grade 1-8 Non-ro	efundable (New family)		
Ministry of Educat	ion mormation.		First languag	ge:				
Country of previous education: Date of en			Date of entr	try into Canada:				
Family Information	n:							
Family Information	F	Guardian			Mother/G	uardian		
Name (first & last):	F	Guardian			Mother/G	uardian		
	F	Guardian			Mother/G	uardian		
Name (first & last): Address (if different	F	Guardian			Mother/G	uardian		
Name (first & last): Address (if different than student):	F	Guardian			Mother/G	uardian		
Name (first & last): Address (if different than student): Citizenship:	F	Guardian			Mother/G	uardian		
Name (first & last): Address (if different than student): Citizenship: Employer:	F	Guardian			Mother/G	uardian		
Name (first & last): Address (if different than student): Citizenship: Employer: Work Phone:	F	Guardian			Mother/G	uardian		
Name (first & last): Address (if different than student): Citizenship: Employer: Work Phone: Cell Phone:	Father/		e for your ch	nild(ren)?				
Name (first & last): Address (if different than student): Citizenship: Employer: Work Phone: Cell Phone: Email Address:	Father/	m in place	e for your ch	. ,				
Name (first & last): Address (if different than student): Citizenship: Employer: Work Phone: Cell Phone: Email Address: Is there a Decision-Ma	Father/	m in place	-	. ,	□ Yes □ No □	In Process		
Name (first & last): Address (if different than student): Citizenship: Employer: Work Phone: Cell Phone: Email Address: Is there a Decision-Ma Siblings Names:	Father/	m in place	-	. ,	□ Yes □ No □	In Process Enrolled at Beacon:		
Name (first & last): Address (if different than student): Citizenship: Employer: Work Phone: Cell Phone: Email Address: Is there a Decision-Ma Siblings Names: 1.	Father/	m in place	-	. ,	□ Yes □ No □	In Process Enrolled at Beacon:		

Church Affiliation:					
Name of Church Attending:		Pastor's Name:			
Address:					
Other Information:					
Has your child received any special s	upport that we should be aware	of?			
Speech & Language Therapist	🗆 Resource Consu	ultant			
Occupational Therapist	🗆 Public Health N	urse			
Physiotherapist	Autism Services	5			
Behaviour Therapist	🗆 Developmental	Consultant			
□ Other:	Niagara Childre	n's Centre			
How did you become familiar with B	eacon Christian School?				
☐ Beacon Website	Social Media				
Word of Mouth Referral	Open House Pro	omotion			
🗆 Church	School Building	/Location/Sign			
🗆 Beacon Event	🗆 Beacon Alumni				
□ Other:					
As a non-profit organization, Beacor Indicate below where you could hel		en parents volunteer.			
School Life:	Fundraising Events:	Board & Committee:			
Class Parent	□ AppleFest	□ Advancement Committee			
□ Hot Lunch Support	□ Beacon Gala	□ Facilities Committee			
□ Library	Spring Auction	□ Finance Committee			
□ Coach / Sports	□ Golf Tournament	Human Resources Committee			
□ Building & Maintenance	Beacon Rewards				
□ Other:					
Why do you wish to enrol your child	l(ren) in Beacon Christian School	?			

Beacon Christian School does not discriminate on the basis of race, ancestry, colour, national or ethnic origin, citizenship, and gender.

### **Enrolment Agreement**

- 1. I understand and wholeheartedly support the unique nature of Beacon Christian School, its purpose and vision, as expressed in the Constitution of the Association and the parent info package (sent out in August each year).
- 2. As the parent/guardian, I sincerely desire to have my child(ren) receive a Christ-centred education at Beacon Christian School.
- 3. I authorize the staff to educate my child(ren) in harmony with the school's objectives, described in the Guiding Principals of the Constitution of the Association and the Parent Information package, and I agree to co-operate with the school to support the most effective course of action to attain the stated objectives.
- 4. I assume responsibility for all financial obligations as may be determined by the Association and promise to fulfill those obligations as outlined in the Tuition Policy (attached), which I have received and reviewed.
- 5. I am aware of the Board's policies regarding enrolment and discipline and will co-operate as necessary with the staff to ensure a positive and safe learning community.
- 6. I grant permission for my child(ren) to participate in activities related to the school curriculum during or beyond school hours, at school or beyond school grounds, provided such activities are properly supervised by a member of the staff.
- 7. I agree to accept responsibility for any injury to my child(ren) which may result from any accident or mishap in the conduct of such activities, not due to the negligence of the Board and/or its employees.
- 8. I understand that I will have access to the normal channels and processes available to all parents and students regarding the daily educational program at Beacon Christian School.
- 9. I agree to abide by all Board decisions.
- 10. Student information is collected under the authority of the Education Act and will be used for the establishment and maintenance of the Ontario Student Record in accordance with Beacon's OSR Policy. Access to OSR Records may be obtained by contacting the principal.
- 11. I understand that Beacon Christian School does not discriminate on the basis of race, colour, or ethnic origin in the administration of educational policy, admission, and in the availability and implementation of its program.
- 12. I acknowledge that Beacon Christian School respects my privacy. Beacon protects personal information and adheres to all legislative requirements with respect to protecting privacy; they do not rent, sell, or trade their mailing lists. The information I provide will be used to deliver services and to keep me informed and up to date on the activities of Beacon, including programs, services, special events, funding needs, opportunities to volunteer or to give, and other information through periodic contacts. If at any time I wish to be removed from any of these contacts, I may contact Beacon by telephone at 905.937.7411 or via email to office@beaconchristian.org.

Signed (Parent/Guardian):	Date:
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(Parent/Guardian): \_\_\_\_\_\_ Date: \_\_\_\_\_\_

#### Parental Consent:

I hereby grant Beacon Christian School, its employees, and agents the right to use pictures and/or video recordings taken of my children while attending Beacon for the promotional purposes of Beacon Christian School, as well as other organizations who wish to use Beacon's various media and images for their promotional use (such as Edvance, the Christian School Foundation, etc.). These will not identify individual students unless parents are notified in advance. This consent will remain in my child's file for the duration of his/her attendance at Beacon Christian School.

Signed \_\_\_\_\_\_

Date \_\_\_\_\_



## **BEACON CHRISTIAN SCHOOL**

Operated by the Association for Christian Education of St. Catharines Approved by the Beacon Board of Directors Spring 2021

## **Tuition Policy**

#### A. Tuition Fees & Payments

Tuition rates are set in the budget and approved annually at the Spring membership meeting. Annual operating costs are covered through a combination of tuition fees and donations. If fundraising goals are not met in a given year, it may be necessary to assess each family an additional amount for tuition fees for that year, subject to Board approval.

A completed *Payment Option Form*, together with post-dated cheques or pre-authorized debit agreement, must be received by the Finance office by the second Friday in June to guarantee your placement in classes. If there are situations where Beacon Christian School cannot accommodate some students as per the Admissions Policy, the families who have submitted payment will have priority. Any changes to the payment options as submitted must have 14 days prior notice to the Finance Administrator. At that time, the payment options may be revised.

#### **Tuition Payment Options**

- Annually
- 100% due December 31
- Semi-Annually
- 50% due September 1, 50% due March 1
- QuarterlyMonthly
- 25% due on the first of September, December, March, and June - 10 or 12 monthly installments starting September 1<sup>st</sup> or 15<sup>th</sup>

The above payment options will be applied to the total fee for the year as indicated on each family's invoice. Alternate options may be available but must be discussed with the Finance Administrator prior to the payment deadline.

A \$500 non-refundable registration fee (\$250 for junior and senior kindergarten) will be required of new families. The registration fee will be applied against the first year of tuition. The remaining tuition balance may be paid using any of the above methods.

Transportation payments will follow the above tuition schedule of payments. Transportation will be billed monthly.

#### **B.** Tuition Assistance

Beacon Christian Schools is committed to making Christian education available to all families and assistance is available to those that are unable to meet the full tuition obligation. To determine if you are eligible for assistance, please contact the Finance Office.

#### C. Refunds & Withdrawals

Families that withdraw their children during the school year must give **60 days notice** of their intention to do so. Provided such notice is received, tuition fees will be billed on pro-rated basis over 10 months.

Families that withdraw their children with less than 60 days notice will be charged as follows:

- Withdrawals prior to February 1 will be charged 50% of the full tuition fee
- Withdrawals between February 1 and April 15 will be charged 75% of the full tuition fee
- Withdrawals after April 15 will be charged 100% of the full tuition fee

Refunds and withdrawals for transportation charges also follow this schedule. The Capital Fee and Membership Fee are non-refundable.

#### D. Appeals

Beacon Christian School recognizes the need for Christian compassion, and this allows us to be flexible with our tuition policy. However, we can only exercise our flexibility when situations are communicated properly with the School Administration.

If for any reason the Administration feels that there is an unwillingness to comply with this policy and payments are in arrears, the situation will escalate to the Executive team and then the Board if needed. The Board may then give written notification that the children of this family must be withdrawn from school within 2 weeks of notification.

#### E. Penalties & Fees

Canceled PAD Payments - Payments cancelled with less than 14 days notice, but prior to the payment date will incur a \$15 administration fee. NSF Fees - PAD payments that decline or cheques that NSF will be charged a \$25 administration fee.



# Beacon Christian School TUITION PAYMENT COMMITMENT FORM

I/We		agree to pay o	ur tuition according to the agreement set in
place below in ac	cordance with Beacon's Tui	tion Policy.	
Timing: □ Bi-weekly, start	ting	_, 20	
□ Monthly over □	□ 10 months or □ 12 month	s, starting	, 20
□ Quarterly (Sept	t/Dec/March/June), payme	nts on	
□ Semi-annually (	(September & March), payr	nents on	
□ Annually (by De	ecember 31 <sup>st</sup> ), payment on		
□ Other interval (	(please specify)		
Payment will be n □ Cheque □ E-transfer □ PAP (pre-autho		nformation below or provide a	VOID blank cheque
Name of Pay	or:		
Street addre	ss:		
City:		Province:	Postal Code:
Telephone: _		Email:	
FINANCIAL II	NSTITUTION: (the "Process	ing Institution")	
Name of F.I.:	·		
Address:			
Account Info	ormation (or attach a void cl	heque):	
Account info	Institution ID Branch Transit #	_        Account #	_     Amount:
consideration of the I		process debits (*PADS) against the Ac	Payee" and "Processing Institution" and is provided in count with the Processing Institution in accordance
			uding the terms and conditions (next page) and I/We ment, including the terms and conditions on next page.
-		signatures are required to sign on the	_
Pre-Notification Wai	-		ebiting, including, without limitation, pre-notification ny applicable tax rate, top-up, or adjustment.
	Date	Signature of Account Holder	
	Date	Signature of Account Holder	
Cancel Payment:	notice will result in a cancella		ject to providing notice of 15 days. Less the 15 days ncellation form, or for more information on your right t <b>www.cdnpay.ca</b> .



## NEW STUDENT SPIRIT WEAR ORDER FORM

For registrations completed by January 15th, 2025

We are thrilled you have decided to enroll your child(ren) at Beacon Christian School! We look forward to walking with you as we partner together to educate your children in His Light. Beacon's tagline is **#LetYourLightShine**. Our mission at Beacon is to equip students to impact communities by serving Christ...in other words..."Let Your Light Shine!" We are offering an enrolment incentive of a **FREE** Beacon Hoodie for all new registrants if we receive your registration by January 15<sup>th</sup>!

We hope your children will wear these hoodies proudly! These sweatshirt hoodies can be worn as part of Beacon's uniform.

Please fill out the form below for each **NEW student** you are registering at Beacon for September 2025 and return to Beacon's office by January 15<sup>th</sup>!



**Questions?** Contact Darlene Teeuwsen, Advancement Director 905.937.7411 or advancement@beaconchristian.org

Parent's Name: \_

New Student(s) & Grade(s): \_\_\_\_\_\_

HOODIE	Gildan 1850 50% Cotton / 50% Polyster							
Colour	Youth XS (4-5)	Youth S (6-8)	Youth M (10-12)	Youth L (12-14)	Youth XL (14-16)	Adult Sm	Adult Med	Adult Lrg
Navy								
Total								

Total # of Items: \_\_\_\_\_