

Returning Student Application Form

Please print the following information.

Date: _____

Name of Child /Children:

Intended Grade Level 2011/2012:

Current Local Address:

Phone #: _____ **E-mail:** _____ **Fax #:** _____

Parents please read and then sign below.

I understand that my child will be expected to abide by the rules and regulations of Bucharest Christian Academy and I agree to fully cooperate. I also agree that I will be responsible to meet all financial obligations incurred by my child while he or she is enrolled at BCA.

Signature (parent or legal guardian) _____ Date _____

Secondary Students please read and then sign below.

I understand that BCA is a Christian school and therefore I agree to cooperate with the staff and faculty of BCA and to abide by the rules of the school.

Student Signature _____ Date _____

Please return this form to the school office, with the registration fee or notification of registration payment by wire transfer.