



**Student Withdrawals**

I understand that BCS has the right to suspend or expel students for non payment, insufficient academic progress, and failure to comply with rules, misbehavior or other conducts that are outlined in the student handbook.

Should my child be expelled or is withdrawn, I agree to continue to pay through the end of the month. I understand that if I decide to withdraw my student from BCS it is my responsibility to fill out an official withdrawal form with the finance office. Once this withdrawal form is completed, I am financially responsible for his/her tuition until the end of that month. I understand that my child's records are under the ownership of BCS until all bills are paid in full and I understand nothing will be released until paid completely. I understand that my child is considered enrolled until a withdrawal form has been turned in to the finance office and will be responsible for tuition and charges

I understand that this is my responsibility and should I fail to pay I understand all attorney fees and related costs incurred through out the entire collection process will be my sole responsibility.

I understand that all other fees will be communicated to me via a monthly bill.

**Volunteer Responsibilities**

I also agree to volunteer 10 hours (single parent family) or 20 hour (two parent family) per school year to establish an atmosphere of community between parents, students, teachers and administration with the common goal of perpetuating and enhancing the academic, social and spiritual development of Brevard Christian School.

If you do not meet your volunteer responsibilities by the end of the 2008-09 school year, you will charged a fee of \$100.00. This fee will be added to your school bill in May of 2009.

We have read, understand and agree with all the above statements and policies.

Name(s) of person financially responsible: Please note that by signing below you are the one financially responsible for your student's tuition. If the students' parents are divorced and share responsibility for the account with BCS, we will only be able to contact and hold those responsible that have signed this agreement.

(1) \_\_\_\_\_ Relationship to student \_\_\_\_\_ Soc. Sec # \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

(2) \_\_\_\_\_ Relationship to student \_\_\_\_\_ Soc. Sec. # \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Finance Manager Signature \_\_\_\_\_ Date \_\_\_\_\_

