



LEONARD E. BURKET
CHRISTIAN SCHOOL

631.878.1727
LEBCS34@GMAIL.COM
WWW.LEBCS.COM
34 OAK STREET
CENTER MORICHES, NY 11934

OFFICE USE ONLY

REGISTRATION _____
 BOOKS/SUPPLIES _____
 TUITION _____

SCHOOL YEAR _____/_____
 GRADE _____
 DISTRICT _____

SCHOOL REGISTRATION FORM (K-12TH GRADES)

Student Name _____ DOB _____ M _____ F _____

Address _____

Mother's Name _____ Place of Employment _____

Address _____ (if different from student)

Phone Number: Home _____ Work _____ Cell _____

Email Address _____

Father's Name _____ Place of Employment _____

Address _____ (if different from student)

Phone Number: Home: _____ Work: _____ Cell: _____

Email address: _____

EMERGENCY CONTACT INFORMATION (if parent or guardian is not available *Required*)

Name _____ Phone _____ Relation to Student _____

Name _____ Phone _____ Relation to Student _____

Doctor's Name _____ Phone _____

Is there any medical information we need to know? (allergies, medication, medical conditions etc.) _____

Previous School Attended _____ Phone _____

If private, have all financial responsibilities been met? Yes No

Church your family attends _____ Phone _____

In what church programs is your child involved? (e.g. youth, choir, royal rangers, etc.)

Pastor Name _____

How did you hear about LEBCS? _____

Why do you want your child to attend LEBCS? _____



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Have you read our student handbook? Yes No

Do you understand and are you in agreement with the policies of the Leonard E. Burkett Christian school as stated in the student handbook? Yes No

If you answered "No" please indicate which policy you do not understand or do not agree with

Special services your child receives (if any):

Resource Room Physical Therapy Speech Occupational therapy Other _____

The following forms and information must be made available to LEBCS before students begin school:

- Birth certificate
- Current immunization record
- Current Physical
- Academic records if student is transferring from another school

*Students enrolling for the first time may be required to take a placement exam.

FINANCIAL INFORMATION

If a student is transferring from another private school, all financial responsibilities at that school must be satisfied before registration at LEBCS will be approved.

- Fees for registration, books and supplies, and first month's tuition must be paid before school starts.
- Subsequent monthly tuition payments are due on the 1st of the month beginning in August and ending in May.

A late fee of \$20 is assessed if tuition is not received by the 10th of the month. If tuition and fees are not paid by the end of any month, students will not be permitted to return to school the following month.

- Registration fee is non-refundable.
- Book and supply fee is non-refundable once the school year begins.
- A full month's tuition is due for any part of the month in which a student attends LEBCS.

The parent(s) or guardian who will be responsible for making tuition payments must sign below.

I have read and agree with the policies of the Leonard E. Burkett Christian School. I also understand my financial obligation to the school and agree to make payments on time and in full.

Signature _____ Date _____

Signature _____ Date _____

If this application is for a student in grades 7 to 12, the student must also sign below.

I have read and agree with the policies of the Leonard E. Burkett Christian School as stated in the student Handbook. I am enrolling in the school voluntarily and will abide by its policies, academically and behaviorally. I understand that any infraction of school policy may result in my enrollment being terminated.

Student signature _____ Date _____