

**BROADFORDING CHRISTIAN ACADEMY**  
**HOME SCHOOL**  
**CLASSES TAKEN OR CHANGED**

DATE: \_\_\_\_\_ ADVISOR: LINDA HIGGINS - HS

STUDENT NAME: \_\_\_\_\_

STUDENT #: \_\_\_\_\_ ACCOUNT #: \_\_\_\_\_ GRADE: \_\_\_\_\_

PARENT NAME: \_\_\_\_\_ PARENT PHONE NUMBER: \_\_\_\_\_

PARENT ADDRESS: \_\_\_\_\_

**BCA ON-CAMPUS CLASSES:**

BCA CLASS NAME: \_\_\_\_\_ AMOUNT: \$ \_\_\_\_\_ ADD / DROP

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BCA SPECIALS CLASS: \_\_\_\_\_ AMOUNT: **FREE** ADD / DROP

BCA ADDITIONAL SPECIALS (\$150.00 EA.) \_\_\_\_\_ AMOUNT: \$ \_\_\_\_\_ ADD / DROP

**TOTAL AMOUNT OF CLASSES: \$ \_\_\_\_\_**

**PAYMENT OPTIONS: {CHECK ONE & FILL IN THE PROPER RELATED INFORMATION}**

\_\_\_ CASH (PAYMENT IN FULL) DATE PAID: \_\_\_\_\_ AMOUNT PAID: \$ \_\_\_\_\_

\_\_\_ CHECK (PAYMENT IN FULL) DATE PAID: \_\_\_\_\_ AMOUNT PAID: \$ \_\_\_\_\_

\_\_\_ CHECK PAYMENT (PARTIAL) {BALANCE SHOULD BE PAID BY THE OTHER ITEM I HAVE CHECKED}

\_\_\_ CREDIT CARD PAYMENT IN FULL {CIRCLE ONE}: (VISA / MASTER CARD / DISCOVER)

CARD # \_\_\_\_\_ EXP. DATE: \_\_\_\_\_ CODE ON CARD BACK \_\_\_\_\_

\_\_\_ DIVIDE BALANCE OVER THE \_\_\_ NUMBER OF REMAINING ACH WITHDRAWS FROM MY BANK ACCT.

\_\_\_ DIVIDE BALANCE OVER THE \_\_\_ NUMBER OF REMAINING STATEMENT PAYMENT I HAVE REMAINING.

PARENT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

My signature here shows my agreement to be responsible to pay these charges in addition to my previously enrolled tuition and fees and any additional charges this child may incur at Broadfording Christian Academy as stated on the Enrollment & Tuition Fee Schedule, Enrollment forms, and Automatic Deduction Forms.

<b><u>OFFICE USE ONLY:</u></b>			
<b>AUTOMATIC PAYMENT INFORMATION:</b>	<b>MONTHLY</b>	<b>QUARTERLY</b>	<b>SEMI-ANNUAL</b>
NUMBER OF REMAINING INSTALLMENTS: _____	AMOUNT DUE PER INSTALLMENT \$ _____		
AUTO-PAYMENT DEDUCTION DATE: _____	THIS PAYMENT TO START ON: _____		
<small>(As noted on my signed Automatic Deduction Form)</small>			
FINANCE COMPLETION: Signature: _____		Date: _____	
SCHEDULING COMPLETION: Signature: _____		Date: _____	

**PLEASE FILL OUT THE ADDITIONAL INFORMATION ON THE REVERSE SIDE OF THIS FORM!**