

# Oakwood Baptist Day School

4315 Chestnut Street Camp Hill, PA 17011

Phone (717)737-7308

E-mail – [lisa.dowdrick@oakday.org](mailto:lisa.dowdrick@oakday.org)

## Application For Enrollment

School Year \_\_\_\_\_

Summer \_\_\_\_\_

Please print:

Child's Name \_\_\_\_\_  
First Middle Last

Address \_\_\_\_\_  
\_\_\_\_\_

Home Phone \_\_\_\_\_

Birthdate \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

School district in which you reside \_\_\_\_\_

Mother's Name \_\_\_\_\_

Employer / Occupation \_\_\_\_\_

Cell Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Father's Name \_\_\_\_\_

Employer/Occupation \_\_\_\_\_

Cell Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Email Address \_\_\_\_\_

With whom does the child reside? (please circle)

Both Parents    Mother    Father    Other (please explain)

Church you attend \_\_\_\_\_

How did you hear about Oakwood? \_\_\_\_\_

Please enroll my child in the following class:

Kindergarten (must come all five days)

all day \_\_\_\_\_ morning \_\_\_\_\_ morning with lunch \_\_\_\_\_

Pre-Kindergarten (ages 4 & young 5's)

all day \_\_\_\_\_ morning \_\_\_\_\_ morning with lunch \_\_\_\_\_

Pre-School (ages 3 & young 4's)

all day \_\_\_\_\_ morning \_\_\_\_\_ morning with lunch \_\_\_\_\_

How many days per week? (please circle)                    3        4        5

Which days? (please circle)                    M        T        W        Th        F

Please indicate who will be permitted to pick up your child.

\_\_\_\_\_

*(Under no circumstances will your child be voluntarily released to anyone not known to school personnel without authorization from parents or guardian.)*

Upon acceptance into Oakwood Baptist Day School, I agree to pay my child's tuition **IN ADVANCE**. All payments are due on the first day of school each week throughout the entire school year, *regardless of illness or vacations*. In case of withdrawal, I agree to give **written** notice two weeks in advance.

I have enclosed a \$50.00 non-refundable registration fee. (Kindergarten is \$100.00 of which \$50.00 will be credited back at the end of September.) Additionally, each family is required to have at least one security fob, which allows entrance to the building. We will collect a \$10.00 deposit for each, refundable when fob is returned.

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

Please print \_\_\_\_\_

-----  
Office use:    LD \_\_\_\_\_    LK \_\_\_\_\_    EP \_\_\_\_\_  
Fob # \_\_\_\_\_    Student # \_\_\_\_\_