



## Brighton Hall Application for Admission

\_\_\_\_\_ Date of Application \_\_\_\_/\_\_\_\_/\_\_\_\_  
Student Name Last / First / Middle

M F Grade Student Entering \_\_\_\_\_ Student's Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Home Address \_\_\_\_\_ / \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
Primary Apt.

Home Address \_\_\_\_\_ / \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
Secondary Apt.

Home Phone # \_\_\_\_\_ Parent Cell Phone # \_\_\_\_\_ Parent Cell Phone # \_\_\_\_\_

Student's Cell Phone # \_\_\_\_\_ Student's E-mail Address \_\_\_\_\_

Last School Attended \_\_\_\_\_

Last School Address \_\_\_\_\_

Father/Guardian Name \_\_\_\_\_ Occupation \_\_\_\_\_

Father/Guardian's E-mail Address \_\_\_\_\_

Address if different \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Employer's Name \_\_\_\_\_ Employer's Phone # \_\_\_\_\_

Employer Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

If Self Employed Name of Business \_\_\_\_\_

Mother/Guardian Name \_\_\_\_\_ Occupation \_\_\_\_\_

Address if different \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Employer's Name \_\_\_\_\_ Daytime Phone # \_\_\_\_\_

If Self Employed Name of Business \_\_\_\_\_

Mother/Guardian's E-mail Address \_\_\_\_\_

Ethnicity (Optional) \_\_\_\_\_ Was your child immersed in a language other than English during  
any point of his/her childhood? \_\_\_\_\_

Brighton Hall offers open enrollment and does not discriminate against Any applicant on the basis of race, sex, color, ethnic origin.

### Parent's Education History

Father: High School \_\_\_\_ Bachelor's Degree \_\_\_\_ Master's Degree \_\_\_\_ Post Graduate \_\_\_\_

Mother: High School \_\_\_\_ Bachelor's Degree \_\_\_\_ Master's Degree \_\_\_\_ Post Graduate \_\_\_\_

### Financial Responsibility

Please indicate the person(s) responsible for the student's tuitions expenses. For example: Father 50%, Mother 50% etc.

Father \_\_\_\_\_

Mother \_\_\_\_\_

Guardian \_\_\_\_\_

### Student Education Information

Has the Student ever needed special education services or interventions? Please explain:

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Please list all schools attended by Student in the past, as well as school's addresses and phone numbers:

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Please list the Student's educational history and provide any documentation that would be important for us to see:

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Does student have any physical, medical or unique conditions of which we should be aware? If so, please specify.

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Please be advised that any inaccurate, incomplete or misleading information on this Application may result in the Student's immediate dismissal from School, the cancellation of the Enrollment Agreement, and/or the School's decision to decline re-enrollment.

## Healthcare Provider Information

Name of Physician \_\_\_\_\_ Phone # \_\_\_\_\_

Health Plan \_\_\_\_\_ Health Care Provider \_\_\_\_\_

Policy # \_\_\_\_\_

## Medical & Emergency Contact Information

Name \_\_\_\_\_ Day Phone # \_\_\_\_\_

Relationship to Student \_\_\_\_\_

Name \_\_\_\_\_ Day Phone # \_\_\_\_\_

Relationship to student \_\_\_\_\_

## Student Immunization Records

Please provide a copy or record showing proof of student's immunizations & submit along with Application for Admission

## Student Health Record / Allergies & History

Date of Last Physical Exam \_\_\_\_\_ Wears Glasses/Contacts? \_\_\_\_\_ Yes \_\_\_\_\_ No

Abdominal Pain \_\_\_\_\_ Rheumatic Fever \_\_\_\_\_ Night Sweats \_\_\_\_\_ TB \_\_\_\_\_ Diabetes \_\_\_\_\_

Fainting Spells \_\_\_\_\_ Emotional Disturbances \_\_\_\_\_ Dizziness \_\_\_\_\_ Shortness of Breath \_\_\_\_\_

Sore Throats \_\_\_\_\_ Hard of Hearing \_\_\_\_\_ Frequent Urination \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Asthma \_\_\_\_\_ Bee Stings \_\_\_\_\_ Hay Fever \_\_\_\_\_ Eczema \_\_\_\_\_ Antibiotics/Specify \_\_\_\_\_

Nuts / Specify \_\_\_\_\_ Other Food / Specify \_\_\_\_\_ Other \_\_\_\_\_

How do we treat/medicate\* your child if she/he manifests an allergic reaction? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\* Please make sure you provide Brighton Hall with indicated medications.

## Student Medication Information

Please indicate if your child is on any special Medication  Yes  No

If Yes, please specify Name / Purpose of Medication:

1 \_\_\_\_\_ / \_\_\_\_\_

2 \_\_\_\_\_ / \_\_\_\_\_

3 \_\_\_\_\_ / \_\_\_\_\_

### Request for Medication To Be Taken During School Hours

To be completed by Parent/Guardian or Physician

Student Name \_\_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Name of Medication \_\_\_\_\_

Purpose of Medication/Diagnosis \_\_\_\_\_

Prescribed Dosage \_\_\_\_\_

Time(s) to be taken at School \_\_\_\_\_

Length of Time this Medication will be Necessary \_\_\_\_\_

Parent's/Physician's Recommendation (Check where Applicable)

Medication will be kept in School Office  Medication will be carried by Student

Medication may have adverse effects (explain):

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#### Special Instructions/Comments:

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I request that my child be allowed to take the above medication at school according to the stated instructions and in compliance with school policy. I further understand that it is solely my responsibility, and not Brighton Hall personnel, to verify that the medication being taken is the correct medication and is being taken properly.

Parent/Guardian/Physician Signature \_\_\_\_\_

Parent/Guardian/Physician Printed Name \_\_\_\_\_

Daytime phone # \_\_\_\_\_ Emergency Phone Number # \_\_\_\_\_

Please be advised that any inaccurate, incomplete or misleading information on this Application may result in the Student's immediate dismissal from School, the cancellation of the Enrollment Agreement, and/or the School's decision to decline re-enrollment.

**AUTHORIZATION FOR RELEASE OF INFORMATION – BRIGHTON HALL**

Form for Student Records Release

**PART I - IDENTIFICATION**

Student Name \_\_\_\_\_ DOB \_\_\_\_\_

Address \_\_\_\_\_ / \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

**PART II RELEASE OF INFORMATION TO BRIGHTON HALL BY  
ANOTHER SCHOOL, ENTITY OR PERSON**

I hereby authorize the Disclosing Party and its employees to disclose education and other records in its possession to Brighton Hall.

1. You are authorized to disclose the following records and information:

- All records about Student and any other information requested
- Scholastic Grades     Psychological Evaluations     Activity Records     Discipline Records
- Health Records     Standardized Test Scores     Special Education Records

2. This authorization is valid until: Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**PART III ADDRESS TO SEND STUDENT RECORDS**

Please forward requested school records to:

Email: Admin@brightonhallschool.org

Fax: (818) 861-7326

Mail: Brighton Hall 755 N. Whitnall Hwy, Burbank, CA 91505

**PART IV PARENT OR GUARDIAN SIGNATURE**

Parent/Guardian Signature \_\_\_\_\_

Parent/Guardian Printed Name \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Daytime Phone Number # \_\_\_\_\_



## CODE OF INTEGRITY AGREEMENT

Brighton Hall has a zero tolerance for plagiarism and cheating. We take these offenses seriously and are committed to making sure that all students understand and acknowledge the importance of maintaining academic integrity at all times.

Plagiarism is defined as "the act of taking the ideas, writings, etc. from another and passing them off as your own." Every student must submit only original writing assignments, or must attribute (cite) the author of any writings and/or ideas that are used within an assignment that will be turned in for credit.

Please read, sign and return the below portion to school office.

I understand that plagiarism and cheating are serious academic offenses that will result in severe consequences. I agree to only submit my original work for credit and to follow the test-taking rules as defined by the administration and teachers. I understand that the use of a cell phone during a test is prohibited and will be determined as cheating.

Violation of these rules will result in the following consequences:

### 1st Offense

A failing grade on the Assignment / Test without the opportunity to make up the work.  
Parent Conference  
5 hours of school community service

### 2nd Offense

A failing grade on the Assignment / Test without the opportunity to make up the work.  
Parent Conference  
A formal letter to be placed in my permanent school record  
10 hours of school community service

### 3rd Offense

School Suspension  
A formal letter to be placed in my permanent school record  
10 hours of community service  
Probable expulsion for cheating on tests

PLEASE SIGN AND RETURN BOTTOM PORTION ONLY TO OFFICE - THANK YOU

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### Code of Integrity Agreement

Student Name:

Student Signature:

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Parent Name:

Parent Signature:

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## 2018-19 CREDIT CARD AUTHORIZATION FORM

This information is confidential and will be kept on file during the 2018-19 school year.  
The credit card listed herein will only be charged as needed for payments explicitly authorized by the cardholder.

Cardholder's Name \_\_\_\_\_

Cardholder's Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_

Cardholder's E-mail Address \_\_\_\_\_

Credit Card (please check one)

\_\_\_\_\_ VISA      \_\_\_\_\_ MASTERCARD      \_\_\_\_\_ AMEX      \_\_\_\_\_ DISCOVERY

Card Number \_\_\_\_\_

Expiration Date \_\_\_\_/\_\_\_\_/\_\_\_\_      CVV/CVC (3 digit number on back of card) \_\_\_\_\_

Cardholder's Billing Address \_\_\_\_\_

Apt. # \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Cardholder's Signature (as it appears on card)

\_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Thank you



## Brighton Hall School 2018-2019 Enrollment Agreement

Student Name \_\_\_\_\_ Grade Level \_\_\_\_\_

### Enrollment Policy

The undersigned parent(s) or guardian(s) (collectively "Parent") hereby enroll the above-named child ("Student") in Brighton Hall School ("Brighton Hall" or "School") ("Parent" and "Brighton Hall"/"School," collectively "the Parties") for the 2018-2019 academic year. For continuing students, enrollment is subject to the successful completion of the current school year and the terms of this Enrollment Agreement ("Agreement"). Provided that Parent signs and returns this Agreement and pays the non-refundable deposit described below no later than May 16, 2018, the School will reserve a place for Student for the 2018-2019 academic year.

This Agreement is for the 2018-2019 school year only. Parent(s)/Legal Guardian(s) understand that this Agreement does not obligate the School to offer enrollment for any succeeding school year. Enrollment for the 2018-2019 school year is also conditioned upon the satisfactory completion of the current school year. The School reserves its right, in its sole discretion, to decline re-enrollment for a future school year.

### Reservation Deposit

To reserve a space at Brighton Hall School for the 2018-2019 school year, Parent agrees to pay a non-refundable deposit of \$500, due no later than May 15, 2018. The deposit will be applied to the tuition and fees described herein.

### Payment Policy

Because the school makes arrangements for the accommodation and instruction of each of its students for the entire academic year, Parent understands that my/our obligation to pay tuition and fees for the full academic year is unconditional, and that no portion of tuition and fees paid or outstanding will be refunded or canceled in the event of absence, withdrawal, or dismissal from the school of the above student. Enrollment, as specified within this enrollment agreement, may not be canceled by parents or legal guardians at any time. If a student withdraws either voluntarily or involuntarily, Parent is obligated to pay the full annual charges and fees as liquidated damages.

### Tuition & Fees

If any payments during the 2018-2019 school year are not completed by Parent for any reason, the School reserves the right to completely modify any of these Plans including requiring full payment of the entire balance of tuition. If a student withdraws before the end of the school year all completed payments are non-refundable. In addition the remaining balance for the school year must be paid in full.



## Parent Participation Program (required)

In an effort to keep our tuition as low as possible, we require a block of Parent Participation hours from every family, with a minimum of 40 (forty) hours donated each year. There are a number of ways parents may fulfill this requirement: volunteering as lunch monitors, chaperoning field trips or dances, organizing school fundraisers, providing snacks for events, purchasing needed office and school supplies. For donation of supplies: each \$15 purchase = 1 parent volunteer hour.

Families fulfill at least 20 volunteer hours per semester. Parents may opt out of volunteering at the beginning of the year and pay a \$400 fee instead. If there are parent volunteer hours still due by May 15, 2019, parents will be billed for the unfulfilled hours (at \$15/hour). Please see Parent Participation Form for more information.

## Withdrawal/Removal

Tuition is owed and paid for a reserved spot in the School, and not for a period of attendance. Subject to the loss of the non-refundable enrollment deposit, Parent may cancel this Agreement by providing WRITTEN NOTICE to the School's Admission Office to be received by June 1, 2018. In recognition that School must make advance operational decisions, including staffing, and that the School's student application pool diminishes to the detriment of the student body after a certain time, Parent's obligation to pay the entire tuition for the School Year becomes fixed and irrevocable as of the date this Agreement is signed by Parent. No portion of any paid or outstanding balance will be refunded or cancelled in the event of the absence, withdrawal, removal or dismissal of the Student after that date. The obligations of the Parent to pay the tuition are joint and several. School is not obligated to replace Student upon the withdrawal or removal of Student for any reason.

To the full extent permitted by law, parent(s)/Guardian(s) voluntarily releases the School, its trustees, officers, directors, employees, agents, representatives, coaches, independent contractors and volunteers from any and all claims and liabilities that may arise out of, or relate to, this Agreement, the Student's enrollment or dismissal from the School, or the Student's education and/or participation in School activities.

## Consent, Release of Liability & Indemnification

Parent hereby gives full consent and permission for Student to participate in all recreational, athletic, co-curricular and extracurricular activities offered by the School (collectively, the "Activities"). Parent hereby fully and forever waives, releases and discharges the School and all of its respective past, present and future agents, and assigns, from and against, any and all claims, demands, causes of action, obligations, liabilities, costs and expenses (including attorneys' fees) of any kind or character whatsoever, arising out of, resulting from, or in any way relating to Student's participation in any and all Activities, arising from or related to the ordinary negligence of any authorized agent of the School. Further, Parent agrees to indemnify and hold the School harmless for any liability, loss, injury or damage to others caused by Student's enrollment in the School and attendance at, or participation in, its classes, programs or events.

## Medical Treatment

Parent authorizes the School to evaluate and provide treatment to Student as deemed advisable in the event of an injury or illness. In the event of a serious injury this consent is to include any and all emergency procedures deemed necessary by the School Nurse, Counselor, Athletic Trainer or professional staff, or other School employee, including but not limited to the transport of Student to a local emergency facility. In the event of transport to an emergency facility, Parent grants permission for treatment by any physician or hospital to which Student was taken.

## Parent/Student Handbook

Parent(s)/Legal Guardian(s) agrees to adhere to all School rules as set forth in the Parent/Student Handbook and elsewhere. The rules may vary from time to time and be modified at the discretion of the School without prior notification to the Student or Parent(s). The Parent/Student Handbook is located on the School's website and a printed copy can be provide upon request.

## Parental & Student Behavior

A positive and constructive working relationship between the School, Student and his or her Parents is essential to the fulfillment of the School's educational mission. Students and their families are required, as a condition to continuing enrollment, to abide by the rules and policies set forth in the Student/Parent Handbook and various standards of academic and social behavior established from time to time by the School. Parent understands, therefore, that the School reserves the right not to extend the privilege of enrollment or re-enrollment to Student, or to suspend or expel the Student, if the School reasonably concludes, in its sole discretion, that the actions of a Parent or Student makes such a positive and constructive relationship impossible or will otherwise seriously interfere with the School's accomplishment of its educational mission.

Parent(s)/Legal Guardian(s) acknowledge that the Head of School, or designee, may in his or her sole discretion, suspend, dismiss, withdraw or expel Student for any reason, including, but not limited to (1) a Student's presence at School is detrimental to the School's environment; (2) a Student's presence at School is detrimental to his or her own welfare or the welfare of others; or (3) Parent(s)/Legal Guardian(s) do not have or cannot maintain a positive relationship with the School.

In addition, Parent understands that the School may discontinue Student's enrollment, and/or prevent him/her from taking exams should any portion of his/her tuition remain unpaid after the due dates described in the Enrollment Agreement. Parent accepts the school's mission, policies, and standard of discipline, rules of behavior and the dress code adopted by the school.

## Letters of Recommendation

Parent waives any right Parent may have to view or access any letters of recommendation that are or were prepared by School personnel on behalf of Student. Parent also waives any claims arising from any letters of recommendation that are or were prepared by School personnel on behalf of Student.

## Media Release

Brighton Hall respects the privacy of its student body and protects the identities of its students. Student's name, voice, and image/appearance will not be used in any of its materials, including print, digital or audio, for internal and external audiences without explicit consent via the Media Release Form.

## Directory Release

Parent agrees to allow the School to release Student's and family's contact information to other School families to facilitate carpool/transportation arrangements, homework assistance and other School purposes. Parent must notify the school office promptly of any change in their address, telephone number or place of employment. The School's directory, email addresses and any other personal and private information about students and their families are confidential and restricted for School purposes only. Any misuse of such information by Student or Parent may result in Student's immediate dismissal from School.

## Force Majeure

The School's duties hereunder shall be immediately suspended without notice during all periods that the School is closed because of force majeure events including without limitation any fire, natural disaster such as earthquake or severe weather, war, government action, epidemic, pandemic, act of terrorism or any other event beyond the School's control. If such an event occurs, the School's duties and obligations hereunder will be suspended until such time as the School, in its sole discretion, may safely reopen.

## Severability

To the extent any portion of this Enrollment Agreement is determined to be invalid or unenforceable, that determination will not render any other portion invalid or unenforceable. The application of this Enrollment Agreement will be given effect without the invalid provision or application, and, to this end, the provisions of this Enrollment Agreement are declared to be severable with the balance of the Enrollment Agreement remaining in full force and effect.

## Integration Clause

This Enrollment Agreement contains all of the terms and conditions agreed upon by the parties. Any other agreements, promises, negotiations or representations, either oral or written, relating to the subject matter of this Enrollment Agreement, not expressly set forth in this Agreement, are of no force or effect. This Enrollment Agreement cannot be amended, modified or supplemented in any respect except by written agreement, signed by all of the parties to this contract.

## Signatures

If both parents are living, BOTH must sign this agreement. Otherwise, the Student's guardian and person having financial responsibility for this Agreement must sign. Each person signing this Agreement is liable for the total payment obligation when due. The obligation is not affected by any private agreements between parents or other parties, or any court orders regarding responsibility for payment of educational expenses.

I /we have read, understand, and agree to all of the terms and conditions of the Enrollment Agreement.

Signature of Parent/Guardian

\_\_\_\_\_ SS# \_\_\_\_\_ Date \_\_\_\_\_

Signature of Parent/Guardian

\_\_\_\_\_ SS# \_\_\_\_\_ Date \_\_\_\_\_

Accepted by the School

\_\_\_\_\_ Date \_\_\_\_\_

Please sign and return to the school office. Upon approval, a copy of this contract will be sent to you.



PARENTAL FIELD TRIP PERMISSION REQUEST

Field Trip Date: \_\_\_\_\_

Field Trip Location: \_\_\_\_\_

By signing this form, I certify and agree to give my permission for my son/daughter, to attend this field trip. I also release Brighton Hall School from responsibility for illness or injury incurred; recognizing that due care and concern will be exercised.

Finally, in the event of illness, accident or emergency, I give Brighton Hall or the Faculty Member in charge, the authority to authorize medical treatment for my son/daughter if person below cannot be contacted.

Lunch :  Bring home lunch    Lunch provided by school    Bring \$ for purchasing lunch

Fee: (if applicable) \_\_\_\_\_

\_\_\_\_\_  
Student Name

\_\_\_\_\_  
Cell Phone #

\_\_\_\_\_  
Parent/Guardian Name

\_\_\_\_\_  
Daytime Phone #

Date Received (Office use only) \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_



BRIGHTON HALL HARRASSMENT COMPLAINT REPORTING FORM

**I - Complainant Information**

NAME \_\_\_\_\_ LAST \_\_\_\_\_ FIRST \_\_\_\_\_ MIDDLE \_\_\_\_\_

ADDRESS \_\_\_\_\_ APT. # \_\_\_\_\_ City \_\_\_\_\_ ZIP \_\_\_\_\_

Home Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_

I am (please check one)  Student  Parent/Guardian  School Employee  Other

**II - Details of the Complainant**

*Please answer the following questions to the best of your ability. Attach additional sheets if you need more space.*

Describe the incident(s) you experienced/witnessed that led to this Complaint, and events or actions in as much detail as possible:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List the individuals involved in the incident(s) of Complaint:

\_\_\_\_\_  
\_\_\_\_\_

List all the date(s) and times when the incident(s) occurred or when alleged acts first came to your attention:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What steps, if any, have you taken to resolve this issue before filing this Complaint?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature/Person Filing Complaint \_\_\_\_\_ DATE \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Received by \_\_\_\_\_ Title \_\_\_\_\_

DATE FILED \_\_\_\_ / \_\_\_\_ / \_\_\_\_



## BRIGHTON HALL SCHOOL PARENT/GUARDIAN MEDIA RELEASE

**Brighton Hall requests** your permission to reproduce through printed, audio, visual, or electronic means activities or photos of your student. Your authorization will enable us to use specially prepared materials to (1) showcase Brighton Hall events and/or (2) increase public awareness of the school through the use of media, displays, brochures, websites, etc. Student names will not be released via externally viewed sources, such as the Brighton Hall website.

A. I, as a parent or guardian of the student named below, fully authorize and grant Brighton Hall and/or its authorized representatives, the right to print, photograph, record, and edit as desired, the image, likeness, and/or voice of the below named student on audio, video, film, slide, etc, (known as "Recordings"), for the purposed stated or related to the above. I understand that my student's name will not be revealed.

B. I understand and agree that use of such Recordings will be without compensation to the student or the student's parent/guardian.

C. I understand and agree that Brighton Hall and/or its authorized representatives shall have the exclusive right, title, and interest, including copyright, in the Recordings.

D. I understand and agree that Brighton Hall and/or its authorized representatives shall have the unlimited right to use the Recordings for any purposes stated or related to the above.

E. I hereby release and hold harmless Brighton Hall, and/or its authorized representatives, from any and all actions, claims, damages, costs or expenses, including attorney's fees, brought by the pupil and/or parent or guardian which relate to or arise out of any use of these Recordings as specified above.

**My signature shows that I have read and understand the release and I agree to accept its provisions.**

Student Name \_\_\_\_\_

Parent/Guardian Name (please print)  
\_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Phone # \_\_\_\_\_ Email \_\_\_\_\_

**Granting of permission is voluntary. Please return the completed form with the Registration Packet. Thank you!**



STUDENT- PARENT HANDBOOK ACKNOWLEDGMENT

By signing this acknowledgment, we affirm that we have read the contents of the Brighton Hall School Student-Parent Handbook and agree to abide by the policies and regulations of the school, including but not limited to the Anti-Bullying/Harassment Policy and the Code of Integrity Agreement.

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Student Name

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Signature

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Parent/Guardian Name

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Signature

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Parent/Guardian Name

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Signature

Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_





## TUITION, FEES & PAYMENT PLANS 2018-2019

### Annual Registration Costs

Grade	Registration*	Parent Fee**	Yearbook	By Check	By Credit Card***
4	\$2150	\$150	\$125	\$2425	\$2500
5 - 7	\$2250	\$150	\$125	\$2525	\$2600
8 - 12	\$2350	\$150	\$125	\$2625	\$2700

### Tuition Breakdown

Grade	Annual Tuition	Paid Semi-Annually	Paid Monthly
4	8,600.00	\$4,400.00	\$890.00
Credit Card Charges***	\$8,860.00	\$4,530.00	\$915.00
5 - 7	\$10,000.00	\$5,100.00	\$1,030.00
Credit Card Charges***	\$10,300.00	\$5,250.00	\$1060.00
8 - 12	\$12,000.00	\$6,100.00	\$1,230.00
Credit Card Charges***	\$12,350.00	\$6,300.00	\$1,270.00

\***Registration:** Enrollment Fee, Books, Supplies, Security, Operations, Insurance, Technology/Computers and more.

\*\***Parent Fee:** This covers Teacher Appreciation Week and similar supportive activities.

\*\*\***Credit Card Charges:** Credit card payments include a standard additional 3% charge.

#### Additional Fees:

**\$250 Seniors Fee:** Covers Graduation Expenses, Graduation Diploma, Transcripts and College Counseling.

**\$375 Science Lab Fee:** For High School students who are enrolled in Biology, Chemistry, or Astronomy.

**\$150 Advanced Placement Classes Fee:** For students enrolled in AP classes taking College Board AP Test.

**Parent Participation Program:** Each family is required to fulfill 40 hours of Parent Participation.

Involvement in fewer than 40 hours will result in a billing of \$10 for each hour less than the requirement.

You may choose to opt out of this by paying \$400 in the beginning of the school year.

**Supplemental Fees:**

\$20-\$40 Field Trip Fees: Will vary based on the trip

\$20-\$40 Misc. Event Fees

Every family is required to fulfill 40 hours of Parent Service. Hours unfulfilled are billed at \$10. You may opt out of this requirement by paying \$400 at the beginning of the school year.

**Select One Payment Plan**

Plan A

Registration balance plus full payment / Due August 10, 2018, before first day of class

Plan B

Registration balance plus semi-annual Payment / Due by August 10, 2018 & January 3, 2019

Plan C

Registration balance plus 10 monthly payments starting August 10, 2018 ending May 1, 2019

**Late Charge:**

Payments not made within a 5-calendar day grace period will be charged a \$25.00 late fee.

**Prepayment:**

If you pay any amount of this debt earlier than the due date, no penalty will be assessed. If you pay this entire debt early, you will be entitled to a refund of any unearned prepaid finance charge.

**Non-Sufficient Funds:**

A charge of \$25.00 shall be added for each check or bank debit transaction returned for non-sufficient funds.

Please list the following information for every person contributing to the payment of this student's tuition.  
*By signing below, the signee agrees to fulfill his/her financial contribution in full by the appropriate deadline.*

(1) Full Name \_\_\_\_\_

Relationship to Student \_\_\_\_\_

Signature \_\_\_\_\_

Phone # \_\_\_\_\_ Alt. Phone # \_\_\_\_\_

Email \_\_\_\_\_

Total financial contribution to student's tuition: \$ \_\_\_\_\_

(2) Full Name \_\_\_\_\_

Relationship to Student \_\_\_\_\_

Signature \_\_\_\_\_

Phone # \_\_\_\_\_ Alt. Phone # \_\_\_\_\_

Email \_\_\_\_\_

Total financial contribution to student's tuition: \$ \_\_\_\_\_



## BRIGHTON HALL UNIFORM ORDER 2017-2018

### PRICES:

WHITE BH POLO SHIRT (White Only) **\$22.00**

SHORT SLEEVE BH T-SHIRT **\$16.00**

LONG SLEEVE BH T-SHIRT **\$20.00**

GREY BH SWEATSHIRT (Grey Only) **\$25.00**

NAVY BLUE BH FLEECE WINTER JACKET (Navy Blue Only) **Y-\$40.00/A-\$45.00**

BH BEANIE (One Size Fits All) **\$15.00**

WHITE BH POLO SHIRT: \_\_\_\_ Youth S \_\_\_\_ Youth M \_\_\_\_ Youth L \_\_\_\_ Adult S \_\_\_\_ Adult M \_\_\_\_ Adult L

SHORT SLEEVE WHITE BH T-SHIRT: \_\_\_\_ Youth S \_\_\_\_ Youth M \_\_\_\_ Youth L \_\_\_\_ Adult S \_\_\_\_ Adult M \_\_\_\_ Adult L

SHORT SLEEVE GREY BH T-SHIRT: \_\_\_\_ Youth S \_\_\_\_ Youth M \_\_\_\_ Youth L \_\_\_\_ Adult S \_\_\_\_ Adult M \_\_\_\_ Adult L

LONG SLEEVE WHITE BH T-SHIRT: \_\_\_\_ Youth S \_\_\_\_ Youth M \_\_\_\_ Youth L \_\_\_\_ Adult S \_\_\_\_ Adult M \_\_\_\_ Adult L

LONG SLEEVE GREY BH T-SHIRT: \_\_\_\_ Youth S \_\_\_\_ Youth M \_\_\_\_ Youth L \_\_\_\_ Adult S \_\_\_\_ Adult M \_\_\_\_ Adult L

GREY BH SWEATSHIRT: \_\_\_\_ Youth S \_\_\_\_ Youth M \_\_\_\_ Youth L \_\_\_\_ Adult S \_\_\_\_ Adult M \_\_\_\_ Adult L

BH FLEECE WINTER JACKET \_\_\_\_ Youth S \_\_\_\_ Youth M \_\_\_\_ Youth L \_\_\_\_ Adult S \_\_\_\_ Adult M \_\_\_\_ Adult L

BH BEANIE (One size fits all): \_\_\_\_\_

### YOUR ORDER INFORMATION

Student Name \_\_\_\_\_ Phone # \_\_\_\_\_

Parent Name \_\_\_\_\_ Phone # \_\_\_\_\_

**Total Quantity of Items** \_\_\_\_\_ **Total Amount Due \$** \_\_\_\_\_

If writing a check, please make it payable to Brighton Hall.

Please Note: All students are advised to order a minimum of FIVE shirts