



Bensalem Baptist Church

APPLICATION FOR ENROLLMENT **FOR** **GRADES 7-12**

APPLICATION MUST BE FILLED IN BY STUDENT AND SIGNED BY PARENT.

Name of

Student: _____
(Last) (First) (Middle)

Soc. Sec. No: _____ Date of Birth: _____

Home Address: _____
_____ Zip: _____

Home phone number: _____

CHURCH

Home Church: _____

Address: _____ Phone: _____
_____ Zip: _____

Senior Pastor's Name: _____

How many services per week so you personally attend? _____
Are you a member of this church? _____
Have you been spiritually baptized? (immersed) _____
Are you involved in a ministry in your church? _____

If yes, what? (Explain what you do) _____

Dr. B.W. Love
Senior Pastor

David Miller
Assistant Pastor
Christian Education

Rodney Love
Assistant Pastor
Youth/Music

Tammy Rivera
Director of
Academic Affairs

3351 Richlieu Road ☐ Bensalem, PA 19020 ☐ (215) 639-5433 **NEW-LIFE**

www.bensalembaptistchurch.org

On a separate sheet of paper, please write out your personal salvation experience. This must be less than 100 words.

Do you strive to have a life-style that demonstrates this testimony? _____

Do you drink alcoholic beverages?	Yes	No
Do you smoke cigarettes or the like?	Yes	No
Are you currently or have you ever-used drugs?	Yes	No
Do you listen to rock and roll?	Yes	No
Do you listen to "Christian Rock"? (CCM)	Yes	No
Do you attend the movie theatre?	Yes	No
Is it your intention to live a biblical life-style?	Yes	No
Do you have personal devotions?	Yes	No

HOME

Father's Name: _____ Work Number: _____

Address if different: _____

Mother's Name: _____ Work Number: _____

Address if different: _____

Do you have any brothers or sisters in your family? _____

Give their first name and age:

1.	_____	_____
2.	_____	_____
3.	_____	_____

Do you obey your parents?	Yes	No
Are both your parents saved?	Yes	No
Do they both go to church with you?	Yes	No
Are they active in your church?	Yes	No
Are your parents in favor of your coming to BBS?	Yes	No

ACADEMIC

School from which you are transferring: _____

Address: _____ Phone: _____

_____ Zip: _____

What grade are you finishing now? _____

Why do you want to attend BBS instead of where you are going now? _____

What extra-curricular activities are you interested in? (check all that apply)

_____ Sports	_____ Vocal Music
_____ Speech	_____ Instrumental Music
_____ Drama	_____ Art
_____ Cheerleading	_____ Crafts
_____ Yearbook	_____ Newsletter

COMMITMENT ON MY PART

It is God's will that I come to Bensalem Baptist School and I am submitting to God's authority in my life and to those whom God has placed over me in this school. I will seek to honor the Lord, my parents, and my school in my personal life.

Student Signature

Parents:

You are asked to check this application and be sure that all questions have been answered.
Upon doing so, will you please sign below. Thank you.

Parents Signature

Applying early is wise as it takes at least one month to get all records from previous school, transportation arrangements, class assignments, and necessary book/texts for student use. Your cooperation in this matter is appreciated.

If you are applying late, please understand that we will do our best to admit students as quickly as possible or notify parents of non-acceptance within a few days.

A personal interview with the principal is required. At this time, we will discuss any questions students/parents may have as well as set up the schedule for the incoming student.