



**Current Family Adding NEW Student
Registration Fee Payment Slip
School Year 2012-13**

Parent(s) Name: _____

Registration Fee \$50.00 per student due upon acceptance:

Name of Student(s):

\$_____ Total For All Students

Questions please call 937-291-7212

Please make checks payable to: DCSS (Dayton Christian School System)

Please mail payment to: Dayton Christian School
Attn: Finance Office
9391 Washington Church Rd.
Miamisburg, OH 45342