



# FINANCIAL CONTRACT 2016

## Homeschool Partnership

**FOR OFFICE USE ONLY:**

NEW  
 Registration only  
 Pending/Final  
 Denied  
RETURNING \_\_\_\_\_  
 Pending  Final

**PERSON RESPONSIBLE FOR SCHOOL ACCOUNT**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Relationship to student \_\_\_\_\_  
Email for Billing Statement (On-line payment instructions are included with the monthly statement) \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ - \_\_\_\_\_  
Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

**STUDENT INFORMATION**

	2016-17 GRADE	CURRENT STUDENT	NEW STUDENT
Last Name _____ First _____ Middle _____	_____	<input type="checkbox"/>	<input type="checkbox"/>
Last Name _____ First _____ Middle _____	_____	<input type="checkbox"/>	<input type="checkbox"/>
Last Name _____ First _____ Middle _____	_____	<input type="checkbox"/>	<input type="checkbox"/>

**WITHDRAWAL POLICY NOTIFICATION**

- Enrollment at SCA is a commitment for the entire year.
- Parents who wish to withdraw their student from school must notify the Headmaster in order to initiate withdrawal procedures.
- All outstanding bills are to be paid before school records, grades or transcripts can be released to a parent, school or institution.
- *Parent-choice withdrawal* is defined as withdrawal for any reason other than 1) parental job change or transfer which results in the student relocating more than 50 miles from the campus, or 2) termination of enrollment by administration (expulsion, etc.).
- *Penalties for parent-choice withdrawal are listed below.*
  - **Withdrawal prior to the first day of school year**, \$100 withdrawal fee per student is assessed and the parent is obligated to pay all fees per student billed through the date of withdrawal.
  - **Withdrawal after the first day of the school year**, a \$250 withdrawal fee per student is assessed and parents are obligated to pay all fees per student billed through the date of withdrawal.

I have read and agree to the above withdrawal policy fees. **SIGNATURE REQUIRED** \_\_\_\_\_

**CONTRACTUAL AGREEMENT**

I have read and understand the SCA financial policies including the withdrawal policy above and pledge to fulfill my responsibilities accordingly. I understand that tuition rates do not cover the cost of operating the school and understand my participation in other ways such as volunteer involvement, monetary giving, and regular prayer efforts are necessary for the benefit of our children.

**SIGNATURE REQUIRED** \_\_\_\_\_

**COURSE SELECTION**

- First course: \$750** COURSE NAME: \_\_\_\_\_
- Second course: \$750** COURSE NAME: \_\_\_\_\_
- Third course: \$750** COURSE NAME: \_\_\_\_\_

**COURSE PAYMENT PLAN – Changes in payment plan after August 1 will incur a \$25.00 penalty fee.**

- Annual Plan** – Prepayment of total course fees due by June 20, 2016
- Semi-Annual Plan**- Prepayment of ½ course fees due by June 20, 2016, ½ due by December 20, 2016
- Monthly Payment Plan** –varies depending on month of enrollment