

For Internal Office Use ONLY:
Date Rcvd:/
Form Pymt:□ Cash □ Check #
Amount: \$
Payment Plan: (1) (4) (12)
Pymt/Period: \$
ACH Draft: (Y) (N)
Photo Opt: (Y) (N)

## AUBURN CLASSICAL ACADEMY **ENROLLMENT & FINANCIAL CONTRACT for 2018-2019**

 Grade 2018-2019
 Grade 2018-2019
 Grade 2018-2019
Grade 2018-2019

I d as specified by one of the three options listed below and to the following terms and conditions:

- 1. This contract offering is for the 2018-2019 school year only. Re-enrollment for subsequent years is subject to both annual academic achievement and classroom appropriate behavior. I have read the Auburn Classical Academy Family Handbook and I have read and understand the Top Reasons Not to Enroll, both available on Auburn Classical Academy's website and agree that as parent or guardian, our student(s) and I will abide by it and act in a manner consistent with these statements. Specifically, I have read and agree to the following:
  - Attendance Policy (Family Handbook, page 9)
  - Electronics Policy (Family Handbook, page 15)
  - Special Academic Accommodations Policy (Family Handbook, page 15)

By extending this contract, Auburn Classical Academy makes no representation or agreement that a contract will be offered for the 2019-2020 school year or any year thereafter.

Parents' Initials:			
Financially Responsible Pty	(if different)	Initials:	 

- 2. Even though the tuition may be paid in installments, this does not constitute a fractional contract. The enrollment agreement is for the full year, and the obligation to pay for the full year is unconditional, without reduction or remission.
- 3. Auburn Classical Academy's duties and obligations under this contract shall be suspended immediately without notice during periods that the School is closed because of "force majeure" events including, but not limited to any fire, act of God, war, governmental action, act of terrorism, epidemic, pandemic, natural disaster, or any other event which is beyond the School's control. In the event Auburn Classical Academy shall be forced to temporarily close due to force majeure, the Board of Governors shall as soon as practicable evaluate the potential length of closure. If in the Board's sole discretion the expected closure will be for such an extended period that it becomes unfeasible to continue charging tuition, the Board may elect to suspend tuition payments in full or in part until Auburn Classical Academy is able to resume operation.
- 4. In the event of unforeseen circumstances or hardship (as defined in the <u>Family Handbook</u> under Financial Policies), parent(s) or guardian(s) may petition the Board of Governors that they may consider, at their discretion, a reduction of monies due under this Contract.
- 5. Auburn Classical Academy retains the right to use any photography and video of school activities and students (both candid and prearranged) for promotional, publicity, advertising, and marketing purposes. No additional notification is deemed necessary with signing of this contract.
- 6. By signing this contract, I also agree to allow the school to publish my name, address, and telephone number in the school directory.
  - □ Please check this box if you do <u>not</u> authorize the use of photography or video of your student.
- 7. This signed contract also verifies that all rules and procedures outlined in the Family Handbook are accepted by parents.
- 8. A non-fundable commitment fee, 10% of total tuition, is due with submission of this Enrollment & Financial Contract.
  - Priority enrollment (current families): January 26 February 8, 2018
  - Open enrollment begins (new families): February 9, 2018

Financially Responsible Pty (if different) Initials:

Parents' Initials:

• Check one of the following options for remaining 90% of total financial obligation:

□ One Payment Plan (June)
□ Four Payments Plan (July, October, January, April)
□ Twelve Payments Plan (monthly June-May); requires a \$10/month processing fee

## **Instructions for Completing Payment Table:**

**Column A:** Write in the number of students per grade that will be attending.

\*For Multi-Student Discount: Place a (1) in the box for the student in the highest grade. For each additional student place a (.9)

\* For Full-Time Lead Teacher /Administrator Discount: Place a (.8) for each student.

**Column B**: Horizontally multiply the tuitions by the number of students in Column A.

**Row C:** Total all the products in Column B.

**Row D:** Multiply the sum in Row C by (.1). *This is your Commitment due at time of enrollment. It is non-refundable and will be deducted from the balance of tuition owed.* 

**Row E**: Subtract the product of Row D from Row C. This is your outstanding tuition to pay per your payment plan.

**Row F**: Place the following number that corresponds to your payment plan option checked in Paragraph 7 above:

One Payment Plan (1) -or- Four Payment Plan (4) -or- Twelve Payment Plan (12)

**Row G:** Divide Row E by the number in Row F.

**Row H:** If you opted for the Twelve Payment Plan and placed a (12) in Row F, write a (10) in this row; if not, write a (0) in this row.

**Row J:** Add Row G and Row H. This is your total payment for each period in your payment plan.

## **Payment Table**

Class	Tuition	A	В
Kindergarten	4135	X	
First	5735	X	
Second	5735	X	
Third	6235	X	
Fourth	6235	X	
Fifth	6235	X	
Sixth	6625	X	
Seventh	6625	X	
Eighth	6625	X	
		C	
		D	
		E	
		F	
		G	
		H	
		J	

Parents' Initials:			
Financially Responsible Pty (	(if different)	) Initials:	

9. Debit Authorization: If paying tuition quarterly or monthly as indicated in Paragraph 7 of this Contract, I authorize Auburn Classical Academy to debit my account for the tuition payments as indicated in Row J of the Payment Table in Paragraph 8 using electronic drafts of my account. I agree to allow the specific transaction amount indicated above in Row J of the Payment Table to be debited from my checking/savings account on the 15<sup>th</sup> of each month according to the above specified payment plan. If the 15<sup>th</sup> of the month falls on a holiday or weekend the monthly debit will take place on the next available business day. If an attempt is made to debit my account and the transaction is not honored by my bank I agree to pay a service fee of \$25 per occurrence.

Bank Name:
Bank Routing Number:
Account Number:
Draft Amount:
□ Please check this box if you do not authorize debit and plan to arrange alternative payment options.
10. If an account is ninety days past due, a student may not (1) enroll in school, (2) enroll during registration for the new school year, or (3) return for second semester; however, the undersigned's obligation for tuition as outlined herein shall remain in effect. In the event this default is cured during a semester, then the student or students may be allowed to enroll at the sole discretion of the Head of School.
11. It is agreed that in the event the undersigned shall fail to pay any one of the installments as elected in Paragraph 7 herein, then all the remaining installments shall at once become due and payable and Auburn Classical Academy may treat them as due and payable without further notice to the undersigned.
12. Auburn Classical Academy policy requires that the full financial obligation for the current year be met before an enrollment contract is offered for the following year. The school reserves the right to withhold examinations, grades, transcripts and/or diplomas for sake of unpaid tuition. Written acceptance of this contract includes the obligation to pay any costs that the school may incur to collect past due tuition and fees, including, but not limited to, the payment of reasonable attorney's fees and al costs incurred by Auburn Classical Academy in order to enforce the performance of any provisions of this agreement.
13. I affirm that I am the parent or legal guardian, and/or financially responsible party of the student(s) named and hereby request enrollment to Auburn Classical Academy. I understand that enrollment is contingent upon the satisfactory completion of current grade requirements, both academic and disciplinary, payment of required fees, and submission of this signed contract. I further understand that each student will be assigned to a grade level based on the educational needs of the student.
Parents' Initials:

Financially Responsible Pty (if different) Initials: \_\_\_\_\_

- 14. Volunteer Obligation: Volunteerism among our families provides vital fellowship opportunities and helps unite families. Further, as ACA continues to grow and expands its opportunities, parental participation becomes significant to success. By signing this agreement you confirm your understanding that your participation of time, gifts and talents is significant to the core philosophy and function of ACA. We thank you in advance for your time and commitment to ACA and look forward to knowing you more.
- 15. Dress Code: I understand and agree to abide the Auburn Classical Academy Dress Code as can be found on our website. I have read the dress code, understand its importance to promoting diligent work ethic and an elevated sense of dignity that frees us from distractions. I further understand and agree to the following in regards to students' personal appearance:
  - Clothes should be clean and well-fitted; there should be NO visible undergarments.
  - Jewelry should be minimal, simple, and worn by girls only.
    - o Girls' earrings should be stud earrings or petit hoops in solid color; one per lobe.
    - o Girls' may wear a single necklace, petite in size with a modest charm.
  - Neither smart watches nor bracelets are allowed for girls or boys.
  - Hair should be neat and well-groomed. Hair should not be dyed any unnatural colors.
    - o Boys' hair shall be above the collar and above the brow-line.
    - o Girls' bangs should be above the brow-line.
  - No visible tattoos or body piercings allowed on either boys or girls.

16. Statement of Faith: The following statements form the foundation of beliefs upon which ACA is established. The substance of these statements is considered primary doctrine. Understanding that we are a school and not a church, issues related to secondary doctrine will be left under the purview of the church as God's appointed authority on such matters.

## The Apostles' Creed

I believe in God, the Father Almighty, the Maker of heaven and earth, and in Jesus Christ, His only Son, our Lord: Who was conceived by the Holy Ghost, born of the Virgin Mary, suffered under Pontius Pilate. was crucified, dead and buried; The third day He arose from the dead; He ascended into heaven, and sitteth at the right hand of God the Father Almighty; from thence he shall come to judge the quick and the dead.

> I believe in the Holy Ghost; the holy catholic church; the communion of saints: the forgiveness of sins; the resurrection of the body; and the life everlasting.

I understand and affirm that the above statement of faith undergirds and directs all of ACA teaching, discipline, philosophy, practice, and method.

Parents' Initials:	
Financially Responsible Ptv (if different) Initials:	

17. With your signature and the return of this contract and your Commitment fee, all signees agree to pay all tuition for the full academic year. Should the person(s) financially responsible for the student(s) above change, the signees below must notify ACA in writing of the change at least 2 weeks prior to the alteration. A new contract should then be completed by the updated responsible parties. Those signing will be personally responsible for the contract and its liabilities. Changes in marital status or changes in custody agreements will not alter the responsibilities of those parties signing below. Should more than one party sign then all parties will be determined to be joint and severally liable.

Parent/Guardian (sign)	Date	Parent/Guardian (sign)	Date
Parent/Guardian (print)	Date	Parent/Guardian (print)	Date
Financially Responsible Pty (sign)		Financially Responsible Pty (sign)	Date
Financially Responsible Pty (print)		Financially Responsible Pty (print)	Date