

### SCA 2015-2016 Financial Agreement

1. I understand that the policy of SCA is to make no refund of registration fees.
2. I understand that payments are due on the 1st of each month. If payment is not received by the 10th of the month, a **\$10.00 late fee** per student will be charged to my account. In the event that the 10th falls on a Saturday or Sunday, payment should be made on the Friday *before* the 10th. Should school be unexpectedly closed on the 10th of the month (as in the case of inclement weather), payment due date will be delayed until the day school resumes.
3. I understand that payment by check is preferred. When cash is used, the correct amount should be given as the school does not keep money on hand to make change.
4. I understand that if my account is still delinquent on the last day of the month, my child will not be permitted to attend classes until the account is satisfied.
5. I understand that the first tuition payment must be paid the first week of school and the last tuition payment must be paid by May 10th if the 10-month payment plan has been chosen or by July 10th if the 12-month payment plan has been chosen.
6. I understand that my account will be charged a **\$20.00 returned check fee for each** check returned on my account. After the second returned check, I understand that my account will be on a **cash only** basis.
7. I understand that there will be a **financial hold** on my child's report card(s) and school records if payment is not current at the end of each grading period. This financial hold will remain in effect until the account is current.
8. I understand that I am ultimately responsible for all payments to this account. The signature below represents that both parents listed on the household form are financially responsible unless a custody agreement or other court document states otherwise.
9. I understand that I have a financial commitment to SCA for the entire school year. If I withdraw my child from SCA during the course of the school year of my own accord, I realize that I am still financially responsible for the month of withdrawal PLUS the following month. If I have to relocate due to unforeseen circumstances and thereby must withdraw my child from SCA, I realize that I will be responsible to pay tuition through the month of my child's withdrawal from SCA, even if the entire month is not completed.
10. I understand that if I withdraw my child(ren) for any reason during the school year and I had elected the 12-month payment plan, an adjustment will be made to my account for the actual cost of education at the time of withdrawal and penalty may apply as stated above.
11. I understand that in order to choose the 12-month payment plan, my account must be in good standing and must have been paid in a timely manner during the previous school year.

Payee's Signature: \_\_\_\_\_

Child's Name: \_\_\_\_\_

Please indicate below the method of payment you will use for this school year:

\_\_\_\_\_ Plan A: 10-month payment plan (August through May)

\_\_\_\_\_ Plan B: 12-month payment plan

\_\_\_\_\_ Plan C: semester pay (1<sup>st</sup> payment due in August; 2<sup>nd</sup> payment due in January)

\_\_\_\_\_ Plan D: full year payment (due in August)

**\* Once a plan is chosen it is in effect for the entire school year.**