

TUITION CONTRACT

PAYMENT AMOUNT

Please list all 1st through 8th Grade students enrolling in ALCA, their grade level for 2009-2010, and the appropriate tuition amount using the "Tuition Fee Schedule" enclosed in this packet.

Student Name	Testing Fee	Registration Fee	Tuition Fee
TOTALS			

PAYMENT SCHEDULE-Registration Fees (non-refundable and non-transferable)

_____ I have included a payment of \$_____ to pay my registration and testing fees in full.

PAYMENT SCHEDULE-Tuition (two options available)

_____ I will make my tuition in full (less 3% per child if payment is made by July 1, 2010) of \$_____

_____ I will make 10 monthly payments from August 2009 through May 2009 in the amount of \$_____ per month.

ALCA Scholarship Fund

_____ I would like to assist students in attending Abundant Life Christian School by donating \$_____ (check one: _____ per month, _____ as a one-time gift)

PAYMENT OPTIONS

_____ I authorize an ACH Debit from my bank account on the 1st of each month. (The ACH Authorization Form is required to be updated each year)

_____ I will be paying with a Personal Check, Money Order, or Cash on the 1st of each month (past due after the 10th of the month).

FINANCIAL AGREEMENT

I affirm that I am taking financial responsibility to pay this tuition contract and by signing below I am entering into a legal and binding agreement with ALCA. I affirm that I am financially capable of maintaining the tuition and any miscellaneous charges for the students listed above for the 2009-10 school year. I understand and agree with all the consequences of my account falling delinquent as outline on the Financial Policies of ALCA, which is included in your registration packet. Any changes to this contract may result in a \$25 reprocessing fee.

_____ I have read and understand the Financial Policies of ALCA.

_____ I understand that the registration fee charged by ALCA is non-refundable unless ALCA does not accept my student for enrollment by August 1 or unless my student moves out of Clark County, Nevada.

_____ I understand in registering my student at ALCA, I am doing so without a guarantee of any financial aid; and the failure to be awarded financial aid is not grounds for reimbursement of my registration or testing fees.

_____ I understand that it is the policy of the Board of Directors that students cannot attend classes or participate in activities once a student's account is (3) three months in arrears.

Parent/Guardian Signature: _____ Date _____

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