The Renaissance Preparatory Academy

1000 South Commons Drive Suite 102-329  
Myrtle Beach, SC 29588

843-800-0590

The

Renaissance

Preparatory

Academy

**Curiosum**

**Humanitas**

**Fortitude   
Opus**



# New Student Application

We appreciate that you have chosen The Renaissance Preparatory Academy for your child. Please complete this packet of information entirely and submit it to the office in order to be considered for enrollment.

1. Complete/read the forms as indicated below.
2. Submit $100 application fee and appropriate registration fee (see fee schedule).
3. Schedule student visitation.
4. Once the application has been received, it will be reviewed and you will be notified of acceptance into the program.

## A completed registration includes the following:

Application

Applicant Information Form

Childhood Health History Form

Pre-Enrollment Modification Form

Tuition Agreement & Fee Schedule

Uniform Agreement & Order Form

Participation in Experimental School Agreement & Permission Form

Parent Input Form

Student Input Form and Visitation Completed

## Non-Discriminatory Policy

The Renaissance Preparatory Academy admits students of any race, color, national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national and ethnic origin in administration of its educational policies, admissions policies, scholarships and financial aid programs, and athletic and other school-administered programs.

# Applicant Information Form

## **STUDENT INFORMATION**

|  |  |  |  |
| --- | --- | --- | --- |
| ***Last*** Name  Click here to enter text. | First Name  Click here to enter text. | Middle Name  Click here to enter text. | Nickname  Click here to enter text. |
| Date of Birth  Click here to enter a date. | Gender  Choose an item. | Home Phone  Click here to enter text. | |
| Street Address  Click here to enter text. | Town  Choose an item. | State  Click here to enter text. | Zip Code  Click here to enter text. |
| Name of Previous School  Click here to enter text. | Street Address  Click here to enter text. | Town  Choose an item. | State  Click here to enter text. |
| Dates Attended From  Click here to enter a date. | To  Click here to enter a date. | Grade or Program Completed  Click here to enter text. | |
| Does the student live full time with both parents?  Choose an item. | If not, please describe custody arrangement & Provide documentation.  Click here to enter text. | | |
| First Name of Sibling 1  Click here to enter text. | Last Name of Sibling 1  Click here to enter text. | Sibling 1 Birth Date  Click here to enter text. | Current School/Day Care  Click here to enter text. |
| First Name of Sibling 2  Click here to enter text. | Last Name of Sibling 2  Click here to enter text. | Sibling 2 Birth Date  Click here to enter text. | Current School/Day Care  Click here to enter text. |
| First Name of Sibling 3  Click here to enter text. | Last Name of Sibling 3  Click here to enter text. | Sibling 3 Birth Date  Click here to enter text. | Current School/Day Care  Click here to enter text. |

## **PARENT /GUARDIAN INFORMATION**

Enrolling Local Parent/Guardian

|  |  |  |  |
| --- | --- | --- | --- |
| Last Name  Click here to enter text. | First Name  Click here to enter text. | | Relationship to Student  Choose an item. |
| Home Street Address  Click here to enter text. | Home Town  Choose an item. | | Home State & Zip Code  Click here to enter text. |
| Mobile Phone  Click here to enter text.  Texting Messages ok?  Choose an item. | Work Phone  Click here to enter text. | | Home Phone  Click here to enter text. |
| Email  Click here to enter text. | | Drivers Licenses # & State  Click here to enter text. | |
| Employer Name  Click here to enter text. | Employer Street Address  Click here to enter text. | | Employer Town, State & Zip Code  Click here to enter text. |

Additional Parent/Guardian with Financial Responsibility

|  |  |  |  |
| --- | --- | --- | --- |
| Last Name  Click here to enter text. | First Name  Click here to enter text. | | Relationship to Student  Choose an item. |
| Home Street Address  Click here to enter text. | Home Town  Choose an item. | | Home State & Zip Code  Click here to enter text. |
| Mobile Phone  Click here to enter text.  Texting Messages ok?  Choose an item. | Work Phone  Click here to enter text. | | Home Phone  Click here to enter text. |
| Email  Click here to enter text. | | Drivers Licenses # & State  Click here to enter text. | |
| Employer Name  Click here to enter text. | Employer Street Address  Click here to enter text. | | Employer Town, State & Zip Code  Click here to enter text. |

## **EMERGENCY CONTACTS & PICKUP AUTHORIZATION**

|  |  |  |  |
| --- | --- | --- | --- |
|  | Emergency Contact 1 | Emergency Contact 2 | Emergency Contact 3 |
| **Name** | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| **Authorized to Pick Up** | Choose an item. | Choose an item. | Choose an item. |
| **Relationship** | Choose an item.  If “Other” Clarify Click here to enter text. | Choose an item.  If “Other” Clarify Click here to enter text. | Choose an item.  If “Other” Clarify Click here to enter text. |
| **Address** | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| **Phone** | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| **Alt. Phone** | Click here to enter text. | Click here to enter text. | Click here to enter text. |

## **MEDICAL INFORMATION**

|  |  |  |
| --- | --- | --- |
| Name of Child’s Physician  Click here to enter text. | | |
| Physician’s Street Address  Click here to enter text. | Physician’s Town  Choose an item. | Physician’s Phone  Click here to enter text. |
| List Any Allergies  Click here to enter text. | | |

## **PARENT/GUARDIAN SIGNATURE**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_  
Parent/Guardian 1 Signature Date Parent/Guardian 2 Signature Date

OFFICE USE ONLY

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| School  Choose an item. | Tour Date Click here to enter a date. | Start Date Click here to enter a date. | Program/GradeChoose an item. | School Year  2017-2018 |

# **Childhood Health History**

|  |  |  |  |
| --- | --- | --- | --- |
| ***Last*** Name  Click here to enter text. | First Name  Click here to enter text. | Middle Name  Click here to enter text. | Nickname  Click here to enter text. |
| Date of Birth  Click here to enter a date. | Gender  Choose an item. | Today’s Date  Click here to enter a date. | |
| **Child’s Health History** | | | |
| Name of Doctor/Clinic:  Click here to enter text. | Address/City/ State  Click here to enter text. | Phone  Click here to enter text. | |
| Were there any significant problems during pregnancy or birth? NO YES, Please Explain: | | | |
| Click here to enter text. | | | |
| Has your child had surgery or been hospitalized? NO YES, Please Explain: | | | |
| Click here to enter text. | | | |
| Date last seen by a healthcare provider (for reasons other than immunizations): Click here to enter a date. | | | |

**Medication**

|  |  |  |
| --- | --- | --- |
| Does your child take medication on a regular basis? NO YES, Please Explain: | | |
| Why? Click here to enter text. | | |
| Names of medication(s), dosage and when taken: Click here to enter text. | | |
| Has your child had any of the following? |  | Age of child or date of incident |
| Asthma | NO | YES, describe: Click here to enter text. |
| Other breathing problems | NO | YES, describe: Click here to enter text. |
| Seizures or other neurological problems | NO | YES, describe: Click here to enter text. |
| Heart or other cardiovascular problems | NO | YES, describe: Click here to enter text. |
| Bladder or urinary tract problems | NO | YES, describe: Click here to enter text. |
| Bowel or other GI problems | NO | YES, describe: Click here to enter text. |
| Bone or joint problems | NO | YES, describe: Click here to enter text. |
| Eczema or skin problems | NO | YES, describe: Click here to enter text. |
| Frequent ear infections or tubes | NO | YES, describe: Click here to enter text. |
| Other ear, nose, or throat problems | NO | YES, describe: Click here to enter text. |
| Tuberculosis exposure | NO | YES, describe: Click here to enter text. |
| Chicken Pox or vaccination for such | NO | YES, describe: Click here to enter text. |
| Diabetes or other endocrine problems | NO | YES, describe: Click here to enter text. |
| Injury or abuse | NO | YES, describe: Click here to enter text. |
| Car sickness | NO | YES, describe: Click here to enter text. |
| Other describe: Click here to enter text. | | |

## **Nutrition History**

Is there any food or drink that your child should not ear for cultural, religious, personal reasons or medical reasons **other than allergies**? ***(Note: use the allergy chart on the next page to list any allergies to food or drink.)***  YES: list below  NO, skip to next question

|  |  |
| --- | --- |
| Name of Food/Drink | Reason |
| Click here to enter text. | Cultural Religious  Personal  Medical/describe |
| Click here to enter text. | Cultural Religious  Personal  Medical/describe |
| Click here to enter text. | Cultural Religious  Personal  Medical/describe |
| Click here to enter text. | Cultural Religious  Personal  Medical/describe |
| Click here to enter text. | Cultural Religious  Personal  Medical/describe |
| Does your child have any problems with chewing or swallowing? NO YES, Please Explain: | |
| Click here to enter text. | |
| Check the box if you have concerns about your child’s | eating habits  Height  Weight |
| Please Describe: Click here to enter text. | |

## **Allergy History**

Does your child have allergies or reactions (including intolerances) to food, medicine, insects, animals or other substances?  YES: list below  NO, skip to next question

**Allergy Chart** : Note: If your child has a food or milk allergy, we must have written documentation of the allergy from the doctor. For milk allergies, the doctor must also name a substitute for the milk.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Do you keep epinephrine (epi-pen) available at home for your child’s allergy? | | | | | YES  NO | | |
|  | | | | | | | |
| **List each allergy or food separately** | **Briefly check symptoms or clarify under food item listed** | | | | **Potential Severe Reaction\*** | | **Doctor/ Date of Diagnosis** |
| Click here to enter text. | Hives | Wheezing | Runny Nose | Shortness of Breath | YES | NO | Click here to enter text.  Click here to enter a date. |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| **List each allergy or food separately** | **Briefly check symptoms or clarify under food item listed** | | | | **Potential Severe Reaction\*** | | **Doctor/ Date of Diagnosis** |
| 1. Click here to enter text. | Hives | Wheezing | Runny Nose | Shortness of Breath | YES | NO | Click here to enter text.  Click here to enter a date. |
| 1. Click here to enter text. | Hives | Wheezing | Runny Nose | Shortness of Breath | YES | NO | Click here to enter text.  Click here to enter a date. |
| 1. Click here to enter text. | Hives | Wheezing | Runny Nose | Shortness of Breath | YES | NO | Click here to enter text.  Click here to enter a date. |

***\*If the allergy has the potential to be severe, the child’s health care provider should complete a medical statement and an allergy care plan should be completed.***

|  |
| --- |
| Additional information about allergies: |
| 1. Click here to enter text. |
| 1. Click here to enter text. |
| 1. Click here to enter text. |

## **Dental History**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name of dentist:  Click here to enter text. | | Date last seen by dentist:  Click here to enter a date. | City/State:  Click here to enter text. | | Phone Number:  Click here to enter text. |
| How would you rate your child’s dental health? | Very Good | Good | Fair | Bad | Very Bad |
| Has your child ever had an injury to the teeth or gums?  Describe: Click here to enter text. | | | | NO | YES |
| Has your child complained about pain in the teeth or gums? | | | | NO | YES |
| Is there fluoride in the water at your home, or is your child taking a prescribed fluoride supplement? | | | | NO | YES |

## **Parental Concerns**

|  |  |  |
| --- | --- | --- |
| Do you have any concerns about your child’s vision?  Explain: Click here to enter text. | NO | YES |
| Do you have any concerns about your child’s hearing?  Explain: Click here to enter text. | NO | YES |
| Do you have any concerns about your child’s speech?  Explain: Click here to enter text. | NO | YES |
| Do you have any concerns about your child’s behavior?  Explain: Click here to enter text. | NO | YES |
| Do you have any concerns about your child’s development?  Explain: Click here to enter text. | NO | YES |
| Do you have any other concerns about your child?  Explain: Click here to enter text. | NO | YES |

|  |
| --- |
| Additional information regarding concerns: Click here to enter text. |
| Click here to enter text. |
| Click here to enter text. |
| Click here to enter text. |
| Click here to enter text. |

The Renaissance Scholars Academy   
**2017-2018 TUITION & FEE SCHEDULE**

## **Application and Annual Registration Fees- NON-REFUNDABLE**

|  |  |  |
| --- | --- | --- |
| Effective Date: June 2016 or Current Month of Enrollment | Returning Student | New Student |
| Application Fee | N/A | $100 |
| Kindergarten (Equipment & Facility fees) | $750 | $750 |
| Primary (Includes above plus Technology Fee = $125) | $900 | $900 |
| Elementary (Same as Primary) | $900 | $900 |
| Grammar (Same as Primary plus Lab fees of $150) | $1050 | $1050 |
| Junior High (Same as Grammar) | $1050 | $1050 |

## **Tuition Rates & Schedule[[1]](#footnote-1)**

| **Program** | **Annual**  (Includes lump-sum discount discount) | **Ten Payment Plan**  (July, August, September, October, November, January, February, March, April, May)—*No payments in December or June* | **Monthly  Payment Plan**  (Begins in June and continues to the following May) |
| --- | --- | --- | --- |
| **Payment Due Dates** | Tuition and annual registration fees are due at time of registration. | 1st of the above 10 months.  Last month and annual registration fees are due at time of registration.  (Late fee[[2]](#footnote-2) applies at noon on the 5th ; see footnote) | 1st of each month.  Last month and annual registration fees are due at time of registration. (Late fee[[3]](#footnote-3) applies at noon on the 5th ; see footnote) |
| **Kindergarten** (available upon  sufficient demand:($8000/year/child) | $7600/one-time payment | $800/payment | $667/month |
| **Primary** (upon  sufficient demand:  ($8000/year/child) | $7600/one-time payment | $800/payment | $667/month |
| **Elementary** (upon  sufficient demand:  ($8000/year/child) | $7600/one-time payment | $800/payment | $667/month |
| **Grammar** (upon  sufficient demand:  ($9500/year/child) | $9025/one-time payment | $950/payment | $795/month |
| **High School** (upon  sufficient demand:($9500/year/child) | $9025/one-time payment | $950/payment | $795/month |
| **Round Tables**  **($650/space/academic year)** | Academic year = $620 (holds one seat for 1 hour for entire academic year whether used or not) | Academic year = $65 (holds one seat for 1 hour for entire academic year whether used or not) | Full year = $55  Billed monthly (holds one seat for 1 hour for entire academic year whether used or not) |
| **Afternoon Enrichment: PT= 1 hour/day**  ($1200/space/academic year) | Academic year = $1140  (holds 1 seat for one hour for the entire academic year whether used or not) | Academic year = $120  (holds 1 seat for one hour for the entire academic year whether used or not) | Full year = $100  (holds 1 seat for one hour for the entire academic year whether used or not) |
| **Afternoon Enrichment: FT = 2 hours/day**  ($2200/space/academic year) | Academic year = $2090  (Holds 1 seat for 2 hours for entire academic year whether used or not) | Academic Year = $220  (holds 1 seat for 2 hours for the entire academic year whether used or not) | Full Year = $185  (holds 1 seat for 2 hours for the entire academic year whether used or not) |
| **Extended Afternoon Enrichment (non-TRPA students)= 3.5 hours/day**  ($3500/space/academic year ≈ $15/day)  Drop in options: $35/day; $100/week payment in advance | Academic Year = $3325  (holds 1 seat until 6pm beginning after other school ends whether used or not) | Academic Year = $350  (holds 1 seat until 6pm beginning after other school ends whether used or not) | Full Year = $295  (holds 1 seat until 6pm beginning after other school ends whether used or not during academic year)) |
| **Drop-in** | $10.00/hour | Billed monthly | Billed monthly |
| **Intersession Day Camps**  ½ day AM = $125/week  ½ day PM = $125/week  All Day (7am-6pm) = $350/week  10 weeks of breaks = $3500  2 weeks are assumed family vacation | Opt A: $3325 for all weekly camps available (holds seat in 10 camps whether used or not)  Opt B: Billed in advance for each week enrolled  Opt C: Drop in = $10/hour; billed monthly | Opt A: $350/month  (holds 1 seat in 10 camps whether used or not)  Opt B: Billed for each week enrolled  Opt C: Billed monthly for drop ins (equivalent full time cost/week = $550) | Opt A: $295/month  (holds 1 seat in 10 camps whether used or not)  Opt B: Billed for each week enrolled  Opt C: Billed monthly for drop ins (equivalent full time cost/week = $550) |

### **Tuition and Extras Payment Determination**

From the above schedule, determine the costs for each of the desired options. Complete the table on the next page. An example is provided in the first column for one student in 1st grade with a family that works 8 to 5 and needs childcare before and after school and during all breaks so that the family has time to get to the facility from work. The number before the “|” is the annual amount and the second number is the 10-payment amount and the third number is the monthly payment account   
(annual $ | 10-month $ | 12-month $).

Determination of Costs for Tuition

| **Categories and Examples** | | **Your Costs** | | |
| --- | --- | --- | --- | --- |
| **Program** | **Example** | **Annual**  (Includes 5% discount) | **Ten Payment Plan**  (July, August, September, October, November, January, February, March, April, May)—*No payments in December or June.* | **Monthly  Payment Plan**  (Begins in June and continues to the following May) |
| **Payment Due Dates** | Annual | 10 month | 12 month | August 15, 2016 | 1st of the Month  (late fee of 10% applies) | 1st of the Month  (late fee of 10% applies) |
| **Kindergarten**  *8:00 am to 4:00 pm* |  |  |  |  |
| **Primary**  *8:00 am to 4:00 pm* | $7600 | 800 | 667 |  |  |  |
| **Elementary**  *8:00 am to 4:00 pm* |  |  |  |  |
| **Grammar**  *8:00 am to 4:00 pm* |  |  |  |  |
| **Jr. High**  *8:00 am to 4:00 pm* |  |  |  |  |
| **Round Tables**  *7:00 – 8:00 am* | $620 | 65 | 60 |  |  |  |
| **Afternoon Enrichment 1 hour**  *4:00 – 5:00 pm* |  |  |  |  |
| **Afternoon Enrichment 2 hours**  *4:00 – 6:00 pm* | $2090 | 220 | 185 |  |  |  |
| **Drop-in** | *Drop-in Is an additional separate monthly bill.* | | | |
| **Weekly Break Camps**  *Unless holding a spot in all week-long camps, this with be separate bills. 2 weeks are not covered for family vacation times.* | $3325 | 350 | 295 |  |  |  |
| **Subtotal** | $13,635 | 1435 | 1207 |  |  |  |
| If this is the ***second and younger*** child enrolled enter .95 here, otherwise use a 1; Qualifying student’s name if sibling: | 1 |1 |1 |  |  |  |
| Multiply family factor by subtotal and place the total product here **This is your tuition cost.🡺** | Estimates $13,635 annual[[4]](#footnote-4)  14,350 10-pmts   14,484 12-pmts |  |  |  |

### **Tuition Payment Plans and Discounts**

#### **Discounts:**

Each family can only use one discount category. If a family is eligible for more than one discount category, the category which provides the maximum benefit will be applied. No discounts may be combined, only one discount per student[[5]](#footnote-5).

#### **Annual Payment Plan:**

A minimum amount equivalent to one of the twelve monthly payments and the registration fees is due with registration although the whole tuition can also be paid at that time. The balance of any tuition is due in full by July 1 or one month after notice of acceptance, whichever comes first. This option reflects a 5% discount. In the event of early withdrawal before July 1, thirty days written notice is required or one month’s tuition is forfeited. In addition, if the year is not completed, the discount will be forfeited and the entire discount will be removed from any refunded tuition amounts. Tuition is for the academic school year only. Tuition does not include before/after care, in-service and early dismissal days, and the fall, winter, spring and summer break camps. However, you can pay for an annual participation in these events in addition to the tuition and also receive the 5% discount. The annual tuition amount will be prorated for the length of time to the end of the school academic year when joining the school after the school year begins but the discount will no longer be available.

#### **Ten-Payment Plan:**

An amount equivalent to 1/10 of tuition and the registration fees is due with registration. After that payment, the Ten-Payment plan is due on the 1st of each month as follows: July, August, September, October, November, January, February, March, and April (May was prepaid). *Please note that the 10-month plan does not include payments during the months of December and June*. Enrolling after the start of the school year, means that the tuition amount will be prorated and the amount due divided by the remaining number of months in the academic year up to 10. This may mean payments in December and June depending upon the date of late enrollment.

#### **Monthly Pay:**

An amount equivalent to 1/12 of tuition and the registration fees is due with registration. After that payment, the remaining 11 months are due on the 1st of each month of the school year from July through May. In the event of early withdrawal, thirty days written notice is required or one month’s tuition is forfeited.

#### **Hourly Charge:**

Drop in care (Round Table AMs and Study Hall PMs) is available to families at a fee at a maximum rate of $10 per hour/family ($10.00 minimum charge) for hours that extend beyond your regularly scheduled time. **Please be aware that there is no care provided before 7:00a.m. or after 6:00p.m.**

#### **Planned Enrichment/Extended Days:**

Extended day and Enrichment activities can be signed up for monthly or on an annual basis. If signed up for on an annual basis they may be included in the installment plans. If signed up for monthly, then they must be paid for at the beginning of the desired month of attendance.

There is a late pick-up fee of $10 per 5 minutes after the regularly scheduled pick-up time after office hours. Please refer to the school calendar for days the school will be closed. If your regular pick-up time is at the end of the school day at 4pm, and you are not there by 4:05 your child will be taken to a current enrichment class and you will be charged for a drop in attendance until you arrive to pick up your child. If this happens more than 3 times during a term, your drop-in rate will increase to $15/hour.

#### **Break Camps:**

Themed day camps will be provided weekly during the breaks. These camps can be signed up for on an annual basis or by the week. If signed up for on an annual basis, they may be included in the installment plans. If signed up for monthly, then they must be paid for at the beginning of the desired week of attendance.

#### **Discounts:**

Tuition is reduced by 5% (in the least expensive full-time program) for each siblings’ additional cost of full-time enrollment (5 school days from 8:00 a.m. to 4:00 p.m.). There is an available 1% discount for families who refer others to the school who enroll and stay enrolled for a full year up to 5%. Thus, if you recommend the school to 5 families who enroll, then at the next school year, you will receive a 5% tuition discount for your oldest child enrolled.

#### **Application Fee, Registration Fees, Facility Fee, Lab Fee, and Security Deposit:**

$100 initial application fee plus various registration fees as outlined on the previous page are due when application is submitted. In the event that you withdraw your child prior to the completion of the academic year to which you have applied and been accepted, you will forfeit all application and registration fees.

If your child is not accepted, the registration fee will be returned but the $100 application fee is non-refundable.

Upon notice of acceptance, a security deposit of either the full tuition (annual plan), or equivalent to a payment (if on one of the monthly plans) is due at the first of the following month to hold the space for your child if it is before the start of the school or by July 1st whichever is sooner or a prorated amount (see Headmaster) is due immediately if you apply and are accepted after the start of the academic year.

If you withdraw before the end of the academic year, the security deposit will be forfeited; alternatively, if you remain the full year, it will be applied to the last payment. In the case of your leaving after having made an annual payment, your tuition will convert to a non-discounted amount and 1/12th is forfeited with the prorated balance returned via check and USPS to the last known address.

#### **Hours/Days of Operation:**

Terms Start—End

**Summer** July 10—Sept. 15; **Fall** Oct. 2—Dec. 15; **Winter** Jan. 8—March 16; **Spring** April 9—June 13

Regular office hours are 7:45 am –4:15pm weekdays.

Morning student drop off without charge begins at 7:50 am.

Extended hours are 7:00 am –6:00 pm.

Afternoon Student pick up without charge ends at 4:10 pm

Late Extended hours Fee of $10/5 minutes begins at 6:05pm

School Facility is closed on the following holidays/In-service days

2017

July 3, 4, 5; Aug. 7; Sept. 4, 29; Nov 10, 20-24; Dec. 22, 25, 29

2018

Jan. 1, 15; Feb. 19, March 30, April 2, May 15, 28; June 14.

No classes held but Facility is open during Term Breaks (except for overlapping holidays see above).

2017

Summer Break July 3 - 7

Fall Break Sept. 18 - 29

Winter Break Dec. 18 – 29

2018

Winter Break Jan. 2 – 6

Spring Break March 19 – 30

Summer Break June 14 - 29

# **THE RENAISSANCE PREPARATORY ACADEMY TUITION AGREEMENT**

## **Admissions Procedures**

The family (you and your child who are both named below) applying to be a part of The Renaissance Preparatory Academy community and commits to complying with all of The Renaissance Preparatory Academy admissions policies and procedures contained in this Tuition Agreement and in the *Student-Parent Handbook*. Even though the Headmaster has signed this Tuition Agreement below, activation of this Tuition Agreement is subject to final acceptance into one of The Renaissance Preparatory Academy of your child in accordance with The Renaissance Preparatory Academy policies and procedures.

## **Tuition**

The Renaissance Preparatory Academy (The Academy) uses a year-round calendar. The official school year begins in July with the first day of the Summer Term and extends to the last day of school in on the final day of the Spring Term as reflected on the official School Calendar (which is attached hereto and made a part hereof). You agree to pay tuition and fees for your child for the entire school year (or, if your child is starting after the first day of school, from the starting date (as agreed in writing with us)) through the final day of school in the Spring Term, subject to the Early Withdrawal policy.

Tuition may be paid in any of the three plans presented as an option on the Fee Schedule. In addition to the tuition and fees set forth in the Fee Schedule, you will pay for any extra charges incurred by your child for care, materials, or activities which are applicable. You may choose to add to the base tuition costs for extended care or for camps during term breaks; however, once committed to these activities, you are enrolled in them and responsible for their costs whether or not your child attends as long as he or she is still enrolled with The Academy. You may pay with credit/debit card through PayPal to the schools’ fund with Social Good; you can send a check to them again with the information about the school attached. Cash deposits must be done via a transfer directly to their bank and can be set up for an automatic draw.

Tuition is still due even if the school is closed beyond the holidays indicated on the school calendar due to unforeseen circumstances. You are paying for the space in the program being reserved for your child not just for the active engagement of your child with his or her program events.

## **Tuition Due / Late Charges**

The Tuition and Fee schedule indicates the time when tuition and fee payments are due and payable. Tuition and fees are considered delinquent at 12:00 noon on the day following the due date. Late charges will be assessed in amounts as reflected on the Fee Schedule commencing at that time. If tuition and any other outstanding charges are not paid within five days of the date due (or within five days of notification to you, in the case of a returned check), attendance at The Renaissance Preparatory Academy will no longer be permitted until tuition is paid in full for the past due amount and for the current period along with any late fees and an additional security deposit will be required.

## **Returned Checks**

A service charge will be assessed in amounts as reflected on the Fee Schedule for a check returned for any reason. In addition, a late charge will be assessed as reflected on the Fee Schedule, unless payment is received to cover the funds within three banking days of notification. If your check is returned three times within a three month period, then for a period of one year, you must make all payments by money order or certified check, or by cash (subject to the policy on “Cash Payments”). This same policy applies to automatic payments which are declined due to insufficient funds.

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## **Cash Payments**

For your protection, cash payments may be made only to the Headmaster or the administrative employee designated on The Renaissance Preparatory Academy’s Community Bulletin Board as being so authorized. If the payment is for an amount of more than $5.00, it will be invalid unless you obtain a computer generated cash receipt from the financial operating system.

## **Early Withdrawal**

Withdrawal from The Renaissance Preparatory Academy during the school year requires at least one month’s advance notice and you forfeit the security deposit. If you paid in an annual payment, the prorated amount refunded will be reduced by the 5% discount for the full tuition paid for a full year previously awarded and the security deposit is forfeited. The whole discount will be forfeited due to the failure to complete the school year.

If on an installment plan, you must continue tuition payments for attendance through the date which is one month after our receipt of your withdrawal notice. At no time will the registration fees be refunded.

If the student is pre-enrolled in the year-long extended care or break camp opportunities, one month’s penalty from each activity will be deducted from the amount remaining. The final adjusted amount will then be refunded. If paid in installments, then all portions already paid are forfeited but remaining portions will no longer be an obligation after that one month notice time period.

## **Holidays / In-Service Days**

The academic year, academic day, and holidays are shown on the School Calendar. Tuition and fees are calculated on an annual basis and must be paid in full without reduction for official closed days (holidays) or inability of a student to attend (student, vacations, student absences or illness) during the official academic year. Because of our year-round program and extended day, we have the ability to formally acknowledge more holidays than the Federal government. The School Calendar shows all holidays and their dates.

No credit/refund will be owed if The Renaissance Preparatory Academy must close because of emergency or inclement weather. Only if official contact time drops below the hourly equivalent of a 180 school days in a year will additional school days be scheduled. Our opening and closing will follow that of Coastal Carolina University for weather emergencies.

## **Hours / Extended Care / Late Pick-Up Charge**

The hours of The Renaissance Preparatory Academy are shown on the School Calendar and in the *Student-Parent Handbook*, including: the time our extended care program starts in the morning, the time you may first drop off your child if he or she is not registered for extended care, the start of classes, the end of classes, the time by which you must pick up your child if he or she is not registered for “extended care”, and the time our extended care program ends (and the building closes).

Extended care requires registration and charges as reflected on the Fee Schedule. Fees for early drop-off and for late pick-up are set forth on the Fee Schedule. If your child is picked up several times after the School building’s scheduled closing time, we may increase the applicable fee. If the student is left without someone picking them up until 6:45 pm for more than 3 times in a term, Child Protective Services will be contacted (See the School Calendar). Late pick-up fees will still apply

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**Family Discounts**

Families with more than one child enrolled full-time at The Renaissance Preparatory Academy must pay full tuition for the child with the highest regular tuition rate (i.e., the discount will be a percentage of the lower tuition amount), but may receive a discount for each additional child after that (See the Fee Schedule for details).

## **Dress Code**

Students are required to comply daily with The Renaissance Preparatory Academy’s dress code which requires either a formal uniform or a casual uniform. There is also a P.E. uniform. Information on the uniforms is found on our website and in the *Student-Parent Handbook.* Students who show up not in uniform will be issued one from our spirit store and their account charged with payment due with the next tuition payment.

## **Suspension / Dismissal**

We reserve the right to suspend or dismiss a child in our sole discretion for unsatisfactory or inappropriate behavior, if we do not have adequate expertise or resources for the child’s educational, medical or other needs (subject to any applicable regulatory requirements), for violations of our policies, or if for any reason we determine it to be in the best interests of the child and The Renaissance Preparatory Academy. In our sole discretion, suspension or dismissal may be with or without notice. However, repeated ethics violations may result in a notification to a family that a school better-aligned with the student’s core values will be more appropriate and the student will be dismissed. If a student is dismissed from The Renaissance Preparatory Academy, there will be a penalty equivalent to one-month assessed and the security deposit will be forefeited. Either the contract will be terminated without any further obligations or, if annual payment was chosen, tuition will be proportionately refunded and the contract will be terminated.

## **Student Illness / Emergency**

We strive to maintain a healthy, safe environment for our children. In that light, you may not bring to Renaissance Prep a child who is ill (determined in our discretion as behavior indicating an illness such as having a fever, vomiting, etc.). We will notify you if your child becomes ill, and you must then pick him/her up as soon as possible. You authorize us to obtain immediate medical care if a medical emergency occurs when you cannot be located immediately. Such care may be from a physician or hospital other than your child’s physician, if, in our judgment, there is insufficient time first to contact your child’s physician. You authorize us to make the decision of when an emergency exists. All students will have the generally required shots for a public school due to the public health hazards without immunization.

## **Use of Photograph, Etc.**

All rights, use, and privileges of any photographs or appearance in any advertising or other media of your child reside with The Renaissance Preparatory Academy. Furthermore, you give your permission for anonymous use of digital representations of your child unless specific other permission is given in written form.

## **Internet Use**

You are notified that, while providing access to vast resources and tremendous learning opportunities, the Internet also has the potential to expose your child to dangerous or inappropriate material. Furthermore, the internet can be consciously misused and even in normal use may result in claims, charges or damages; you agree to release The Renaissance Preparatory Academy and its employees from all claims, charges and damages of any nature arising from use or misuse of the Internet. You further agree that The Renaissance Preparatory Academy may require you and your child provide further documentation before your child’s use of the Internet.

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## **Renewal**

Registration at The Renaissance Preparatory Academy is on an academic year basis but your child’s placement in a specific class or grade may be adjusted as determined solely by The Renaissance Preparatory Academy and its faculty and staff. Your child will not be guaranteed a reservation for the following school year, unless you enter into a new tuition agreement with The Renaissance Preparatory Academy for that new school year and pay all applicable fees.

## **Responsibility**

As the Parent/Guardian of your child, you are ultimately responsible for your child’s actions and their resultant consequences. In acknowledgement of this responsibility, you agree that to be responsible for any loss, damage or destruction by your child of any property of The Renaissance Preparatory Academy and for any damages for which The Renaissance Preparatory Academy becomes liable or chargeable because of your child’s actions.

## **Student Records**

Unless legally required, all student records remain the property of The Renaissance Preparatory Academy. Yet, we are sensitive to the personal nature of such records. Therefore, by entering into this Tuition Agreement, you authorize us to send to schools your child attends after The Renaissance Preparatory Academy (once we receive a request from such a school) official copies of academic records and confidential recommendations. You also confirm that you will not seek access to such evaluation materials and confidential recommendations. Furthermore, you release The Renaissance Preparatory Academy and its faculty and staff from any and all liability resulting from or pertaining to the furnishing of recommendations and records. Furthermore, The Renaissance Preparatory Academy is participating in a research program with scholars from Coastal Carolina University. As such, all student records, visuals of artifacts created by the student, and any videos will be available to the primary investigator or assignees on a confidential basis for the purposes of educational research. By entering into this Tuition Agreement, you are providing permission for your child’s records to be a part of this ongoing research. There will be no additional requirements of you or your student beyond the normal school activities with the exception of seeking your opinion of certain school activities much as is provided by college students in teacher evaluations. If you choose to not be a part of the ongoing research, there is a 10% surcharge on tuition.

Initial Here for permission \_\_\_\_ Initial here for no permission \_\_\_\_\_

## **Costs of Collection**

If a circumstance arises where we refer your account for collection, you agree to pay all our costs of collection, including (but not limited to) attorneys’ fees.

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## **Parental/Child/Sponsor Commitment to Programs and Identification of Child**

This Tuition Agreement is for the enrollment of

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Child’s Name  Click here to enter text. | | | | Child’s Date of Birth  Click here to enter a date. | | | Child’s Start Date  Click here to enter a date. | | |
| Tentatively Entering Grade: | Kindergarten | 1st | 2nd | 3rd | 4th | 5th | 6th | 7th | 8th | 9th |

I/we agree to the above terms and conditions, including the obligation to pay to The Renaissance Preparatory Academy all charges for tuition and fees, and in all events to be responsible for the financial obligations of this child.

Parent/Guardian/Sponsor 1 Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Click here to enter a date.

Print Name Click here to enter text.

Parent/Guardian/Sponsor 2 Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Click here to enter a date.

Print Name Click here to enter text.

**ACCEPTED**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Headmaster \_\_\_\_\_\_\_\_\_\_**

**Headmaster Signature Printed Name Date**

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**Uniform Agreement & Order Form**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Casual Uniform Item** | **Source** | **#** | **Cost** |  |
| ***OPTIONAL*** |  |  |  |  |
| Youth XS White Polo | French Toast Embroidery |  | $15/each |  |
| Feminine XS White Polo | French Toast Embroidery |  | $15/each |  |
| Youth S White Polo | French Toast Embroidery |  | $15/each |  |
| Feminine XS White Polo | French Toast Embroidery |  | $15/each |  |
| Youth M White Polo | French Toast Embroidery |  | $15/each |  |
| Feminine M White Polo | French Toast Embroidery |  | $15/each |  |
| Youth L White Polo | French Toast Embroidery |  | $15/each |  |
| Feminine L White Polo | French Toast Embroidery |  | $15/each |  |
| Youth XL White Polo | French Toast Embroidery |  | $15/each |  |
| Feminine XL White Polo | French Toast Embroidery |  | $15/each |  |
| Adult S White Polo | French Toast Embroidery |  | $15/each |  |
| Feminine Adult S White Polo | French Toast Embroidery |  | $15/each |  |
| Youth XS Yellow Polo | French Toast |  | $11/each |  |
| Feminine XS Yellow Polo | French Toast |  | $11/each |  |
| Youth S Yellow Polo | French Toast |  | $11/each |  |
| Feminine XS Yellow Polo | French Toast |  | $11/each |  |
| Youth M Yellow Polo | French Toast |  | $11/each |  |
| Feminine M Yellow Polo | French Toast |  | $11/each |  |
| Youth M Royal Blue Polo | French Toast |  | $11/each |  |
| Feminine M Royal Blue Polo | French Toast |  | $11/each |  |
| Youth L Royal Blue Polo | French Toast |  | $11/each |  |
| Feminine L Royal Blue Polo | French Toast |  | $11/each |  |
| Youth XL Royal Blue Polo | French Toast |  | $11/each |  |
| Feminine XL Royal Blue Polo | French Toast |  | $11/each |  |
| Adult S Royal Blue Polo | French Toast |  | $11/each |  |
| Feminine Adult S Royal Blue Polo | French Toast |  | $11/each |  |
| Girls: Grey Bermuda Short | French Toast |  | $16/each |  |
| Girls: Grey Adj. Waist Pant | French Toast |  | $18/each |  |
| Boys: Grey Flat front Adj. waist short | French Toast |  | $16/each |  |
| Any white socks  Boys: white athletic socks (calf high), white athletic sock (low cut) | TBD | **---** | TBD | **Individual order** |
| Girls: Anklet socks, white stockings, athletic socks, Low cut athletic socks | TBD | **---** | TBD | **Individual order** |
| Any solid white shoe-lace tying athletic shoes | TBD | **---** | TBD | **Individual order** |
|  |  |  |  |  |
| **Regular Uniform Item** | **Source** | **#** | **Cost** |  |
| Boys: Grey, Adj. Waist Double Knee Pant | French Toast |  | $19/each | **Individual order** |
| Boys white long sleeve button down (Temperature < 65 degrees) or short sleeve button down dress shirt (Temperature>65) | French Toast |  | $10 to 20 depending upon size | **Individual order** |
| Girls white Peter Pan shirt with long sleeve (temperature <65 degrees) or short sleeve (temperature > 65 degrees) | French Toast |  | $10-20 depending upon size | **Individual order** |
| Boy: School Tie in blue and yellow plaid | French Toast |  | $7 |  |
| Girls: Cross-tie School Tie in blue and yellow plaid | French Toast |  | $7 |  |
| Girls: Heather Grey pleated scooter with square buckle belt | French Toast |  | $17 | **Individual order** |
| Girls shoes = Mary Janes (closed toe with ankle strap), black loafers (Grammar and up) | TBD |  | TBD | **Individual order** |
| Grey Cardigan/jacket with school logo | TBD |  | TBD | **Individual order** |
| Boys shoes = black Velcro closure or tied shoes (no slick bottoms or black loafers (Grammar and up) | TBD |  | TBD | **Individual order** |
|  |  |  |  |  |

# **PARENT QUESTIONNAIRE**

*To be completed by parent or guardian*

Student Name: Click here to enter text. Date of Birth: Click here to enter a date.

School or program Student is currently attending: (if applicable) Click here to enter text.

What are the first three words that come to mind when describing your child0?

Click here to enter text. Click here to enter text. Click here to enter text.

What do you see as your child’s strengths?

Click here to enter text.

What are your child’s favorite subjects in school?

Click here to enter text.

Click here to enter text.

What do you see as your child’s social and academic challenges if there are any?

Click here to enter text.

Click here to enter text.

What educational and social goals do you have for your child?

Click here to enter text.

Click here to enter text.

Please list outside hobbies, sports, and other interests your child is presently or has formerly participated or been interested in:

Click here to enter text.

Click here to enter text.

Check the words that best describe your child:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Confident | Creative | Perfectionist | Mature | Negative Leader |
| Organized | Irritable | Manipulative | Honest | Easily Discouraged |
| Articulate | Follower | Attentive | Social | Over-protected |
| Cheerful | Vivacious | Responsible | Shy | Self-disciplined |
| Oppositional | Anxious | Aggressive | Helpful | Conscientious |
| Enthusiastic | Immature | Perfectionist | Curious | Positive Leader |

Parent/Guardian/Sponsor Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Click here to enter a date.

# **STUDENT INPUT**

*To be completed by student in own handwriting*

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Apply for Grade \_\_\_\_\_\_\_\_\_\_

Current School \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. School Activities
2. Other Activities

What is your favorite subject in school and why do you like it?

What do you like about school?

What do you like least about school?

Tell us about your family.

Please complete the following sentences:

I like it best when a classroom is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Something surprising about me is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

My greatest strength is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

When I grow up I want to be \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

# **TEACHER RECOMMENDATION**

*To be completed by teacher*

Name of Applicant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Applicant for Grade \_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent or guardian: Please write your child’s name in the space above and give this to your child’s teacher with an addressed/stamped envelope for each teacher to whom you submit this form.**

The information contained on this Teacher Recommendation form is confidential and will be used only in the selection of applicants and will not become part of the applicant’s permanent file. This completed form will not be available to applicants, parents, or anyone outside of the Admissions Committee.

**Teacher:** **Please complete this confidential form and return it to** The Renaissance Scholars Academy **via mail or scanned file into PDF.**

This Teacher Recommendation form will be treated confidentially and will not be shared with parents. You may wish to retain the original copy for your files. Thank you for your cooperation and honesty. **The child’s application cannot be processed until this form is received in the Admissions Office.**

The Renaissance Scholars Academy

C/O Admissions

XXXX Sesame XYZ Road

Myrtle Beach, SC 29579

(843) XXX-ZZZZ

Or email PDF of completed recommendation to [Renaissance.headmaster@gmail.com](mailto:Renaissance.headmaster@gmail.com)

**Social & Study Skills**

Please indicate relative skill level and support with examples in comment section.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| *Ratings* | *Above Average* | *Average* | *Below Average* | *Comments* |
| Responds positively to constructive criticism |  |  |  |  |
| Establishes friendships easily |  |  |  |  |
| Is comfortable in a group |  |  |  |  |
| Respectful of property (personal and others) |  |  |  |  |
| Accepts responsibility for actions |  |  |  |  |
| Demonstrates self-control |  |  |  |  |
| Is cooperative |  |  |  |  |
| Demonstrates appropriate energy level |  |  |  |  |
| Exhibits emotional maturity |  |  |  |  |
| Demonstrates appropriate behavior |  |  |  |  |

**Communication Skills**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| *Ratings* | *Above Average* | *Average* | *Below Average* | *Comments* |
| Ability to express ideas verbally |  |  |  |  |
| Clarity of writing style |  |  |  |  |
| Grammar/Mechanics skills |  |  |  |  |
| Reading rate and fluency |  |  |  |  |
| Reading comprehension |  |  |  |  |
| Knowledge and usage of vocabulary |  |  |  |  |
| Imagination and creativity |  |  |  |  |
| Problem-solving skills |  |  |  |  |

Check the words that best describe this applicant:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Confident | Cheerful | Perfectionist | Mature | Negative Leader |
| Organized | Irritable | Manipulative | Honest | Easily Discouraged |
| Articulate | Follower | Self-centered | Social | Over-protected |
| Motivated | Vivacious | Responsible | Shy | Self-disciplined |
| Oppositional | Anxious | Aggressive | Helpful | Conscientious |
| Well-liked | Immature | Perfectionist | Witty | Positive Leader |

Briefly describe the work habits/abilities/challenges. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How long has this applicant attended our school? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Us applicant habitually tardy or absent? 🞎 Yes 🞎 No

In the last three years has this student been 🞎 suspended? 🞎 expelled?

This applicant is:

🞎 Highly Recommended (Top 5%) 🞎 Strongly Recommended 🞎 Recommended 🞎 Recommended with Reservations 🞎 Not Recommended

If you checked “Recommended with Reservation” or “Not Recommended”, please explain. If the same recommendation is not appropriate for all the schools to which the applicant is applying, please explain. \_\_\_\_\_\_\_

Are the parents/guardians actively involved and demonstrate and do they show respect for all members of the school community? Please comment. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is there anything else that would be helpful for the Admissions Committee to know?

How long have you known this student and in what capacity? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Teacher: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School City and State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Tuition is due on the first day of the month for installment options and on the indicated day for the annual option. Payment other than automatic withdrawal has a $5 handling fee. A late payment fee of $25 is assessed at noon on the day following the due date. Returned checks are assessed a $25 service charge. Withdrawal from the school during the school year requires at least one month’s written notice. Tuition will be refunded proportionately at the end of that notice time period with a contract termination penalty fee equivalent to one month’s tuition for all enrolled programs involved in the contract. [↑](#footnote-ref-1)
2. The initial late fee begins at noon on the day after 5 days past the due date, then, every 5th day thereafter, an additional late fee of 10% on the total amount due applies to the maximum extent allowed by law. [↑](#footnote-ref-2)
3. The initial late fee begins at noon on the day after 5 days past the due date, then, every 5th day thereafter, an additional late fee of 10% on the total amount due applies to the maximum extent allowed by law. [↑](#footnote-ref-3)
4. This comes to about $5/hour for 11 hours per weekday for education and child care for your child for a full year! [↑](#footnote-ref-4)
5. An exception to this rule is the rule regarding the facility discount. [↑](#footnote-ref-5)