

THOMAS HART ACADEMY
Enrollment Contract and Promissory Note
2008 - 2009

Date received _____

Student Information

New Student

Returning Student

Student Name

Nickname

Grade

Date of Birth

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Persons Financially Responsible For Contract

Name

Social Security Number

Name

Social Security Number

Street

City

State

Zip Code

Home Phone Number

Business Phone Number

Terms of Contract

Tuition and other fees and/or charges are explained in the Thomas Hart Academy Schedule of Tuition and Fees for School Year 2008 - 2009. I agree that enrollment of my child or children is for the full school year and that signing this contract obligates me financially for the full school year.

Specifically, I promise to pay \$_____ of tuition to Thomas Hart Academy with the specific terms being in accordance with the terms of the payment option I have chosen below. If I choose the monthly payment option, I agree and accept that in accordance with school policy my child may be refused admittance if my account is unpaid as of the 30th day of the month following issuance of a bill. **I agree to pay monthly any and all additional fees incurred by my child/children during the course of the school year with the fees and/or charges for June 2009 due by June 10, 2009. I agree to be responsible for all attorney's fees, court costs, and costs associated with collection of late or unpaid bills on my delinquent account.**

Initial ____ Initial ____

(OVER)

Tuition Repayment Plan

I agree that a Tuition Repayment Plan (TRP) is in place to protect my yearly financial obligation under the terms of this Enrollment Contract. Participation in the plan is required unless annual fees are paid in full by July 1, 2007. This program gives me the opportunity to insure fees (prepaid and due) required by the terms of this enrollment contract in the event of premature withdrawal. For semi-annual and monthly payment schedules, TRP insurance must be paid in full at the time of first payment, regardless of payment schedule. I authorize the school to collect any claim payment to which I am entitled under the TRP and credit it to my account, paying any excess to me. I agree to pay within 30 days after receipt of a final itemized bill for the remaining unpaid balance, if any, after the TRP payment is credited to my account. **TRP does not become effective until student has been in school for fourteen consecutive school days.**

Financial Obligation Options (Please choose one and initial)

{ }___ OPTION ONE

Annual Payment: Total tuition of \$ _____ is due by July 10, 2008.

{ }___ Yes, I wish to carry the optional TRP Insurance.

{ }___ No, I do not wish to carry the optional TRP Insurance.

{ }___ OPTION TWO

Semi-Annual Payment: Total tuition amount to be paid in two equal payments of \$ _____. The first payment is due by July 10, 2008. The second payment is due by January 10, 2009. TRP is payable at the time of first payment.

Note: TRP INSURANCE IS REQUIRED FOR OPTION TWO.

{ }___ OPTION THREE

Monthly Payments: Total tuition amount of \$ _____ to be paid in twelve monthly payments of \$ _____ commencing on July 10, 2008 and ending on June 10, 2009. Monthly invoices will be mailed by the first of each month and payments are due on the tenth (10th) of each month. TRP is payable at the time of first payment.

Note: TRP INSURANCE IS REQUIRED FOR OPTION THREE.

Thomas Hart Academy reserves the right to test all applicants, and reserves the right to terminate this contract for disciplinary infractions as outlined in the Student Handbook or other matters deemed necessary by the Board of Directors.

Regardless of the payment option chosen, all remaining charges on account must be paid in full by June 10, 2009. I understand that final report cards, recommendations, or transcripts will not be considered or released until all accounts are paid in full.

This contract is non-assignable and shall not be binding until executed by Thomas Hart Academy.

Signature Parent/Legal Guardian

Date

Signature Parent/Legal Guardian

Date

Signature of Thomas Hart Academy Representative

Date