



## GATE Program Student Enrollment Form

Lower School  
2016-2017 School Year

Student Name \_\_\_\_\_ Grade (next year) \_\_\_\_\_

Parent(s) Name \_\_\_\_\_ Re-enrollment: Yes \_\_\_\_\_ No \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

I am requesting that my child participate in the Gifted and Talented Enrichment (GATE). I agree to pay Hill Country Christian School of Austin for these services and understand that I will be billed according to the payment method indicated below.

**Payment Options - \$1600/yr. (please check one option below)**

- \_\_\_\_\_ Annual                      \$1600 one-time payment  
(payable through TADS September 2016)
  
- \_\_\_\_\_ Semi-Annual              Two equal payments of \$800  
(payable through TADS September 2016 and January 2017)
  
- \_\_\_\_\_ Monthly                      Nine equal payments of \$177.78  
(payable through TADS September 2016 through May 2017)

Please sign and return this enrollment form to the school office, in care of Laura Traub, in order to secure a spot. Space is limited, and students will be placed on a wait list if capacity is reached for their grade level.

**I understand that this is a commitment for the school year, and that if I choose to withdraw my child by December 31, 2016, I will be responsible for full fees for one half of the annual tuition, unless the school is able to fill the slot with another student. No refunds will be made for withdrawal after December 31, 2016.**

I have read, understand, and agree to the terms of this contract set forth by Hill Country Christian School of Austin.

\_\_\_\_\_  
Parent(s) Signature

\_\_\_\_\_  
Date

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School Use Only

Date Rec'd	Submitted to Business Office	GATE Coordinator Laura Traub