

ISACS Sample Enrollment Contract

Both parents, guardians, or other persons responsible for payments should read all the provisions of this Contract, complete the required information, sign and return the Contract to the Admission Office accompanied by a non-refundable Reservation Deposit of \$1000. A student is accepted for enrollment or re-enrollment when the Contract has been delivered to the School, countersigned and dated. A copy of the accepted Contract will be returned prior to the start of the school year. No amendment to this Contract and no alteration or addition to the printed terms hereof will be effective without the express prior written approval of the School's Board of Trustees.

Student's Name _____ Grade to Enter _____ Date to Enter _____

In consideration of the acceptance of this Contract by the School, the undersigned agrees to pay the required TOTAL TUITION for the full academic year and any additional fees incurred and agrees to be bound by the provisions of this Contract. So long as tuition and fee payments are not delinquent, tuition payments are due no later than the dates listed on the reverse side of this Contract.

Enrollment and Re-enrollment is conditioned upon the following terms:

1. Successful completion of the current academic year and recommendation of the School is required for re-enrollment of currently enrolled students.
2. A non-refundable Reservation Deposit of \$1000 must accompany the Contract. This deposit will be applied against tuition. Tuition payments must be received by the School on or before each due date. Tuition for students entering the School after the start of the school year will be prorated based on the number of attendance days remaining in the school year after entry compared with the total attendance days in the school year.
3. In view of your obligation to pay the total tuition, a Tuition Refund Plan is available at this time to protect your obligation under this Contract. This Plan gives you an opportunity to insure tuition obligations (prepaid and due) in the event of separation according to the terms of the policy.

Please read the enclosed brochure and letter concerning this Plan and check either A or B below. It is imperative that we have this completed for each child enrolled. **Please check one of the following:**

____ A. I wish to participate in the Tuition Refund Plan. I understand that the premium cost is due on the first tuition due date. The premium rate will be a small percentage of the TOTAL TUITION. I authorize the School to collect any claim payment to which I am entitled and credit it to my account paying any excess to me. (See enclosed letter listing premiums for each level and an explanation of coverage.)

____ B. I do not wish to participate in the Tuition Refund Plan. I understand that no refund or cancellation of tuition or fees will be made by the School for absence, withdrawal, or expulsion/ dismissal before the end of the school year and agree to assume full responsibility for tuition and all related fees.

4. Acceptance of enrollment constitutes an agreement to pay the full academic year's account, comprised of both TOTAL TUITION and all related fees and expenses of the student. The School is entitled to be reimbursed for any attorney's fees and costs incurred in the collection of any unpaid balance.
5. In support of this contract, a promissory note for the balance of the year's tuition (with 0 % interest) will be issued by the school and signed by the parents in those cases in which parents choose an installment payment plan in lieu of full payment prior to the beginning of the school year.
6. The student and the student's family agree to comply with and be subject to the School's rules and policies as set forth in the Parent-Student Handbook, as amended from time to time.
7. An account is considered delinquent if not paid within 10 business days of the due date. A late payment fee of 1-1/2% per month, or fraction of a month, will be charged on a delinquent account. Whenever a tuition or fee account becomes past due for a period of 90 days from its due date then, unless the School shall obtain adequate security acceptable to the School for such account within that 90 day period, the student will be withheld from classes until the delinquency is cured. If the delinquency is not cured within an additional 30 day period, the student will be dismissed. In all events, the first tuition installment payment must be paid on or before the first day of school or the student's place will not be reserved. The student will not be enrolled in classes.
8. Transcripts will be held for students until all unpaid tuition and fees are received.
9. The terms and provisions on the reverse side of this Contract must be completed and are included as part of this Contract by reference.

Accepted:

The Avery Coonley School

By: _____

Date: _____

Both parents must sign this contract:

Signature _____
Father/Guardian or Person Responsible for Payment

Signature _____
Mother/Guardian or Person Responsible for Payment

Tuition Payment Schedule

Level	Annual Tuition	<u>One Payment Plan</u>		<u>Three-Payment Plan*</u>		
		Deposit	Due if paid full by 8/15 (5% discount)	Due 8/15	Due 11/15	Due 2/15
Pre-school	\$3000	\$1000	\$1850	\$1000	\$500	\$500
Kindergarten	\$6000	\$1000	\$4700	\$2000	\$1500	\$1500
Grades 1-8	\$9000	\$1000	\$7550	\$3000	\$2500	\$2500

*Promissory note due with 8/15 payment

Please complete the following student-parent information.

All of the following information is important to the school and needed on a yearly basis.
 Addresses and home phone numbers will be listed in the school directory.
 Please be as complete as possible. Your cooperation is most appreciated.

Student's Name/Information

Last _____ First _____ Middle _____
 Date of Birth _____ Social Security Number _____ - _____ - _____ Gender of Child: Male _____ Female: _____
 Address _____
 City _____ State _____ Zip _____ Home Phone _____ - _____ - _____

Father's Name/Information

Title _____ Last _____ First _____ Middle _____
 Home Address (if different from Student's) _____
 Home Phone _____ - _____ - _____ Social Security Number _____ - _____ - _____
 Business Name _____ Position _____
 Bus. Phone _____ - _____ - _____
 Business Address _____
 City _____ State _____ Zip _____

Mother's Name/Information

Title _____ Last _____ First _____ Middle _____
 Home Address (if different from Student's) _____
 Home Phone _____ - _____ - _____ Social Security Number _____ - _____ - _____
 Business Name _____ Position _____ Bus. Phone _____ - _____ - _____
 Business Address _____
 City _____ State _____ Zip _____

Alternate Phone Number to be Listed in the Directory (in addition to the home phone number)

Type (car, pager, work, etc.) _____ Number _____ - _____

Note- The Avery Coonley School directory will list names as they appear on this contract. If you wish to list your names differently, please indicate so here:

Please list the name of any professional or civic memberships in which either parent is included.

If parents are separated or divorced, to whom shall we send the following?

General correspondence: _____ Mother _____ Father _____ Both

Copies of report cards: _____ Mother _____ Father _____ Both

Billing: _____ Mother _____ Father _____ Both

Name _____ Address _____

City _____ State _____ Zip _____ Phone _____ - _____ - _____

 Author: ISACS. Contract reviewed by Leo Athas, ISACS Legal Counsel, of Athas, Apostol, Kowal & Bridge, CHTD, 208 S. LaSalle, Suite 688, Chicago, IL 60604, 312-578-0254
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