

2011-2012 Tuition Commitment

Westridge Christian Academy/Orchard Academy will base its budget on the number of students enrolled. Please pray about this commitment, for you will be held responsible for all tuition/fees due.

Tuition must be paid in full at time of registration or in 12 monthly bank drafts (August-July). For monthly payments a voided check or debit/credit card number must be submitted at the time of registration.

In consideration of the acceptance of this Enrollment Contract by Westridge Christian Academy/Orchard Academy the undersigned agrees to pay the required tuition and fees as specified.

Choose one option:

Registration: \$100.00

 Annual Payment

 Monthly Payment

One payment of
is due prior to August 1 (Aug-July)

12 payments of \$ OR 10 payments of \$
drafted on the 1st day of each month June-May for 12 mo or
Aug-May for 10 mo

I understand that my obligation to pay the tuition and fees for the **full academic year** is unconditional and that after Aug 1, no portion of tuition/fees paid or outstanding will be refunded or cancelled in the event of absence, withdrawal or dismissal from Westridge Christian Academy/Orchard Academy except in the case of the death of the child. I also understand that a fee of \$25 will be assessed for any returned checks. Should collection become necessary, all reasonable costs of collection, including court costs expenses, and reasonable attorney's fees will be paid by the undersigned.

In signing this Enrollment Contract for the coming academic year, I am agreeing to accept the rules and regulations of Westridge Christian Academy/Orchard Academy as stated in the Student's Handbook and the rule concerning payment of tuition and fees as referred to above. Furthermore, I agree to the policy of Westridge Christian/Orchard Academy that no student's grades or transcripts will be released unless this account has been paid in full.

This contract shall be interpreted in accordance with the laws of the State of Georgia.

My signature below affirms that I have read, understood and accept the terms and conditions of this contract.

Signatures of Parent/s or guardian/s financially responsible for student/s:

1) _____ Date: _____

2) _____ Date: _____

Student/s Name/s:

1) _____

2) _____

3) _____

4) _____