

CHRISTIAN CENTER SCHOOL, INC.
2009/2010
FINANCIAL AGREEMENT

Name and address of person to whom bills are to be sent:

Name: _____

Address: _____

I agree to the following payment plan:

_____ Paid in full by June 15 (6% Discount on Tuition Only)

_____ Paid in full by August 15 (3% Discount on Tuition Only)

_____ 10 month plan - 1st payment due September 1

I am responsible for the tuition payment(s) indicated above. I understand all payments are due on the 1st of each month beginning in September with final tuition payment due in June. These payments may include other charges or fees, such as morning/afternoon learning center, transportation, etc., as described in the 2009/2010 statement of fees. I understand if my child arrives at school between the hours of 6:30 a.m.- 8:00 a.m. or remains at school between the hours of 3:30 p.m.- 6:00 p.m., morning/afternoon learning center fees will be charged to my account. A late fee of **10% of the Total Amount Due** will be charged to accounts showing a balance due after the **10th of the month**. When the **10th** falls on a Saturday, Sunday, or holiday, please make arrangements to have the payment into the office prior to the **10th** to avoid a late fee. The maximum late fee is \$30.00 unless the account is over 30 days Past Due.

If my account becomes **10 days delinquent, from the tenth of the month, my child(ren) will not be allowed to attend classes until my account is up-to-date.** Statements are furnished monthly as a convenience to parents, however, in the event a statement is not received, I understand that it is my responsibility to see that the payment is made on time. I understand if I withdraw my child, transcripts will not be released unless the account is paid in full. If it becomes necessary for my account to be put in collection status, all legal fees will be my responsibility. Any disputes over ELC sign-in or sign-out times must be discussed with the school office within sixty (60) days of the date of the statement in dispute, or payment will be required as invoiced.

Signature of person/persons responsible for payment

Date

Christian Center School, Inc. admits students of any race, color, national or 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 or ethnic origin in the administration of its education, admissions, scholastics, athletics or other school administrated programs.

CHRISTIAN CENTER SCHOOL, INC.
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REGISTRATION

Striving to "Make everything Jesus is, available to every student every minute."

STUDENT INFORMATION:

Date: _____ Student's Social Security #: _____ (Mandatory)

Student's Name: _____

Grade Entering: _____ Date of Birth: _____ Current Age: _____

Please check one: Boy Girl Home Phone: _____

Present Address: _____

PARENT INFORMATION:

FATHER

MOTHER

Parent's Names: _____

Home Phone: _____

Business Phone: _____

Cell Phone: _____

Occupation: _____

Social Security #: _____
(Mandatory)

E-Mail Address: _____

I give permission for my e-mail address to be given to the Parent Teacher Student Fellowship (PTSF) for updates on meetings, activities and fellowship events: YES NO

Home Address if Different from Student*

Father: _____

Mother: _____

*Copy of the Court Order is required if a natural parent
or legal guardian is not authorized to pick up this student.

My child will use aftercare: ___periodically ___ daily

We are members of Christian Center Ministries: ___ yes ___ no

If no, Church Name: _____

Church Address: _____

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REGISTRATION
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STATEMENT OF COOPERATION :

We, as parents, accept the challenge to "train up a child in the way he should go" in our home. In so doing, we also recognize Christian Center School to be an extension of the home for purposes of instruction and character building.

We sincerely pledge our loyal support to the school through praying for the faculty, administration, and school programs. We will give as we are able, and consistently support school activities and events. We will bring any and all questions or concerns quickly to the teacher, and if necessary, to the Principal.

We give permission for our child to take part in all school activities, including sports, and sponsored trips from the school premises (including transportation whether by auto or bus), and absolve the school from liability to our child because of any injury at school or during school activities not due to willful negligence of CCS. We request that CCS contact us in case of an illness or accident. If the school is unable to reach either parent, we authorize the school to contact our physician and/or make necessary arrangements for emergency medical care.

We give permission to use photographs of our child for public relations purposes. We understand all photographs taken are the property of CCS. This includes promotional material as well as the CCS web page. (www.ccmfamily.org/school)

We hereby state that we have received, understand, agree with, and support the procedures and policies stated in the Christian Center School Parent/Student Handbook.

We, as parents, hereby agree that if we can no longer conform to the above, we will not try to change the school to fit our child's needs but will promptly withdraw our child from the school.

Voluntary Withdrawal: To allow coordination with families on our waiting list, written notice is required 30 days prior to withdrawing your child(ren) from CCS. With a 30 day written notice, your tuition will be pro-rated from the 30 days following your notice of your voluntary withdrawal. If 30 days is not given, you are responsible for the next full tuition payment. **No refunds (including book fees) will be made without 30 days written notice.** Military families that are being transferred out of the area on quick notice from the government are exempt from this policy and should turn in copies of transfer papers as soon as received.

Please sign below indicating that you have completed the registration form completely, read the Schedule of Fees, the Financial Agreement for 2009/2010, and read the above Statement of Cooperation. Signing below indicates that you understand and agree with the rates and policies of Christian Center School, Inc. as outlined on these pages.

NEW CCS PARENTS: PLEASE SIGN THIS PAGE DURING YOUR INTERVIEW AFTER YOU REVIEW THE PARENT/STUDENT HANDBOOK WITH THE PRINCIPAL.

Parent or Legal Guardian Signature

Date

Parent or Legal Guardian Signature

Date

FOR OFFICE USE ONLY

Check Number: _____ Amount Received: _____ Date Received in the Office: _____

Updated in HM: _____ Updated e-mail: _____ Initials of Office Staff: _____