



TUITION CONTRACT 2019-2020

I (we) clearly understand and accept the Tuition Policy as outlined by the Board of Education ("Board") of the Academy.

I (we) understand that there is a separate fee \$350 per student for books, \$150 activity fee per student, \$85 technology fee per student (Non-refundable) and \$50 smart tuition fee per family (only for families with payment plans) all due before the school year commences. Late fee of \$100 will be charged if all of the above mentioned school fees are not paid by May 31st, 2019.

Please select one of the following three payment options:

1- () It is mutually agreed that the tuition for the student named _____ will be paid in full at the beginning of the school year.

OR

2- () I/ we are not in a position to pay the tuition at the beginning of the year; it will be paid in accordance with the following payment plan:

Amount due by	1 st Child	2 nd Child	Additional Children (per child)
August 26 th , 2019	\$1,890	\$1,512	\$1323
January 2 nd , 2020	\$1,890	\$1,512	\$1323
April 1 st , 2020	\$1,890	\$1,512	\$1323
Total	\$5,670	\$4536	\$3969

OR

3- () I/ we request a special payment plan. We are able to pay the tuition in 10 installments, (Aug. 2019– May 2020)

(The 1st installment is due on August 26th, 2019 and the last (10th) installment is due on May 1st, 2020.

Furthermore, I (we) agree to abide by the tuition policies and deadlines as outlined above and take full responsibility for any delinquent amounts that may be owed by us. I (we) also understand and agree that in case of a delinquent account my child (ren)'s **records will not be released** to any third party (including other educational institutions). I (we) have also read and understand the **Student Withdrawal Policy** stated in the Madina Academy Handbook. **If I (we) withdraw our child from the Academy for any reason, we agree to pay the tuition in full per this agreement.** If it is necessary to employ a professional collection agency and/or attorney to enforce or to collect a judgment based upon this agreement, I / we will be responsible for paying all expenses accrued including, but not limited to, collection agency fees, court fees and attorney fees.

Father's (Guardian's) Name: _____

Mother's (Guardian's) Name: _____

Names of other children if attending Madina Academy: _____

Mailing Address _____

Telephone: Home / office/ mobile: _____

Father's (Guardian's) Signature

Date

Mother's (Guardian's) Signature

Date

Administrator's Signature _____

Office use only	
Date Rec'd:	Student Name:
Received by:	
Comment:	