



## Financial Agreement Preschool

Family Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

**E** nrollment Fee Per Student \$150.00 (One time non-refundable)

Includes:

- Application/Enrollment
- Equipment
- Supplies
- Student Liability Insurance

**T** uition

Grade	Enrollment Fee	Monthly Fee	Annual Fee	1st Semester	2nd Semester
Preschool	\$150.00	\$450.00	\$4,500.00	\$2,250.00	\$2,250.00

**F** irst monthly payment is due August 1st and thereafter every month for nine consecutive months ending on May 1st. **I agree to pay a late fee of \$25.00 if payment is not paid prior to the 10th of the month.**

## **Students Enrolling**

Please list the names of the children who will be attending Canyon Christian Academy for the upcoming school year.

Students Name	Grade Entering

## **Our preferred payment plan is (select one option)**

\_\_\_\_\_ 10 Month payment plan

\_\_\_\_\_ Annual (pay school year in full)

\_\_\_\_\_ By the Semester

I understand the Enrollment Fee presented in this document is nonrefundable.

**Print Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_