

Calvary Chapel Christian School

Tuition Commitment

Payments are due the first of every month. Payments received after the 10th day of the month will be charged a late fee of \$25. If the balance is not paid within 30 days of the initial due date, enrollment will be terminated unless arrangements have been made with the administration.

Due to the financial obligation of the school to its general operating budget, students who withdraw after the school year has convened, except for emergencies or extreme circumstances, will be assessed 20% of the remaining annual tuition as a withdrawal fee.

Preschool Tuition

Pre-K	\$1650/yr.	8:30-11:30 Mon.-Thur.	(\$165 X 10 payments, Sept. 1 st -June 1 st)
3 yr. old	\$900/yr.	8:30-11:30 Tue./Thur.	(\$90 X 10 payments, Sept. 1 st -June 1 st)

Registration/material fee: \$75/year per student (non-refundable, due upon registration)

Date registration fee paid: _____ Tuition total: _____

K-8th Tuition

1 student-\$3600/yr.	8:30-3:30 M-Thur.	(\$360 X 10 payments, Sept. 1 st -June 1 st)
2 students-\$5800/yr.	8:30-3:30 M-Thur.	(\$580 X 10 payments, Sept. 1 st -June 1 st)
3 students-\$7000/yr.	8:30-3:30 M-Thur.	(\$700 X 10 payments, Sept. 1 st -June 1 st)

Registration fee: \$100/family (non-refundable, due upon registration, will be applied as a credit to the material fee) Date registration fee paid: _____

Material fee: Kindergarten \$150/year per student
Gr. 1-8 \$250/year per student

Material fee total: _____ Tuition total: _____

Registration fee credit: _____ Monthly commitment: _____

Material fee balance: _____

Date paid: _____

(Due Aug. 1st)

I agree to the conditions of this contract.

Parent/Legal guardian

name: _____ **Signature:** _____

Billing address: _____

Student names and grades: _____

_____	_____
_____	_____
_____	_____

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K-8 Application for Admission

Student name _____ Date of birth _____ Grade _____
Student name _____ Date of birth _____ Grade _____
Student name _____ Date of birth _____ Grade _____
Student name _____ Date of birth _____ Grade _____

Family Information:

Home address _____ City _____ Zip _____
Father's name _____ Mother's name _____
Cell phone _____ Cell phone _____
Occupation _____ Occupation _____
Employer _____ Employer _____
Work phone _____ Work phone _____
Number of siblings _____
Email address _____

Church Information: (optional)

Family home church _____ phone # _____
Pastor _____
Church attendance () regular () occasional () seldom

Student Information:

School last attended: _____
What is your greatest desire for your child/ren in regard to Christian education? _____

Do any of your children have areas of specific learning difficulties? _____

Have any of your children ever repeated a grade? _____

Do any of your children have above-grade-level abilities? _____

Have any of your children ever received disciplinary action at school? _____

Is there any other information that CCCS should be aware of? _____

Have you read the CCCS Statement of Faith, and are you in agreement with it? _____

Parent/Legal guardian's
signature _____ Date _____