Effective \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 2024/ 2025 this contract is by and between \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, hereinafter referred to as **“The Parent/s”, AND CROSS CHRISTIAN ACADEMY**, 110 Holly Street, Seaford, DE 19973, hereinafter referred to as **TCCA**.

**Purpose:** The purpose of this contract is to document the regular payments that the parent/s has agreed to pay. These regular payments will assure the Board of the parent/s ability to meet their financial obligations to TCCA.

**Terms:** Whereas TCCA is interested in providing a “Christ-centered” education for the child/children of the parent/s, and has presented the cost of this education to the parent/s in the meeting, the parent/s agrees to the following terms of payment:

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*

Balance or credit due $(\_\_\_\_\_\_\_\_\_\_) $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Credit) (Balance due) Hardship Discount

**If you have any outstanding balance, you are required to pay before enrolling your child/children in the following school year.**

Enrollment for 2024-2025 school year:

\_\_\_Grade $500.00 per month per child for 10 months X\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_

\_\_\_Grade $400.00 per month 2nd child for 10 months X\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_

\_\_\_Grade $300.00 per month 3rd child for 10 months X\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_

\_\_\_Grade $300.00 per month 4th child for 10 months X\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_

 TOTAL TUITION DUE $\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Total Due $\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Additional assessments: Any student being withdrawn or dismissed from TCCA will be billed for that month’s fee and any other outstanding balance due to the school. TCCA reserves all rights to hold any and all report cards until payment has been received.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Payment**

I/we will make monthly payments by cash or check.

I will pay $\_\_\_\_\_\_\_\_\_\_\_ X \_\_\_\_\_\_\_\_\_\_ to equal $\_\_\_\_\_\_\_\_\_ per month.

Tuition due the beginning of each month starting September 2024 and concluding June 2025.

Registration/ Book Fee is not included in tuition payment calculation.

The first payment is due September 1st, 2024 with subsequent payments due the 1st of each period as indicated above. As per agreement with TCCA.

**TUITION POLICY**

1. All students enrolling for the new school year will have the previous year balance paid in full in order to enroll. After 2 missed payments the student will no longer be enrolled at TCCA.

2. Families are to remain current with their payments as agreed upon**.** This will allow the school to function throughout the school year without taking out loans and incurring more cost.

3. Any family with an outstanding balance and not enrolled will be contacted for payments. If monthly payments discontinue, the family may be turned over to a collection agency.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ACKNOWLEDGMENT:**

THE PARENT/S agrees to communicate to the TCCA Board of Directors any change in ability to pay tuition on time. This will ensure the full cooperation of the Board in the appropriate adjustment of the payment schedule.

THE PARENT/S acknowledge that they (he/she)

-have read this contract and tuition policy,

-understand this contract and policy,

-recognize the importance of timely payments,

-Missing two payments will result in dismissal of the student/s,

-Hereby agree to the payment schedule set forth herein.

**THE Cross Christian Academy reserves the right to dismiss any family.**

TCCA requests that each parent/s who are financially responsible for enrolled child(ren) to please sign below.

The Cross Christian Academy THE PARENT/S or Legal Guardian

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Date Date