



3900 SE State Road 100, Starke, FL 32091
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www.myhopechristianacademy.org
'Helping Children Achieve'

2017 - 2018 Registration

Early Enrollment for Current HCA Families - Friday, February 17, 2017 - Friday, March 3, 2017
(\$50 per student or \$100 per family)

Enrollment for Current HCA Families - Monday, March 6, 2017 - Friday, March 31, 2017
(\$75 per student or \$125 per family)

Open Enrollment to Public - Monday, April 3, 2017 - Until Classes Are Full
\$100 per student

Student Name: _____ Grade Entering: _____

Registration, Fee, Payment Policies and Guidelines - Please read the following and initial signifying that you fully understand the registration, fee, and payment policies, and guidelines.

Initial

Registration fees are NON-REFUNDABLE. This excludes new applicants that do not meet our approval process upon further review of student records. Records will be requested for all new applicants (please see attached request form). Upon HCA's review and approval process, we will contact families in order to complete the remaining steps in the application process.

Early registration is not available to those with an outstanding bill or balance from any HCA department.

Tuition is due in 12, 11, or 10 monthly payments. Payment schedules are as follows: 12 Month Plan-Payment #1 due Thursday, June 1, 2017, 11 Month Plan-Payment #1 due Monday, July 3, 2017, and 10 Month Plan-Payment #1 due Tuesday, August 1, 2017. All other payments are due on the first of each month with the last payment being due on Tuesday, May 1, 2018. Please ask about our Full Pay and Two Pay Tuition options.

If my account is more than one month in arrears, my child will not be permitted to return to class until the balance is brought up to date.

Late tuition accrues a \$10.00 penalty per student on the 10th of each month.

All tuition payments are NON-REFUNDABLE. I(we) further understand that the total annual tuition is due in full even if my child is withdrawn or expelled, except when extenuating circumstances are submitted and approved by school administration. I(we) also agree to pay the cost for collection, including attorney fees, filing fees, court cost, etc., plus late charges on the outstanding balance should it become necessary.

This paper alone does not reserve a seat for my child for the 17/18 school year. Payment must accompany this form. Forms returned without payment, Scholarship Award Letter, or notification of McKay intent, will not be considered as enrolled and forms will be returned to enrolling family.

By signing, I am stating that I have read and agree with the above, and have attached a NON-REFUNDABLE registration fee to hold a seat for my child for the 2017-2018 school year at Hope Christian Academy.

Printed Parent/Guardian Name

Parent/Guardian Signature

Current Physical Address

Home Phone Cell Phone Email

Amount Paid: Paid by: cash check # credit card Date

School Representative Accepting Payment