



Kent High School Co-Op Statement of Financial Commitment 2019-2020

Parent(s) Name _____
Child/Student: _____ Grade: _____

Person(s) Responsible for Membership Fees: _____
Address _____ City _____ State _____ Zip _____
Home Phone _____ Cell Phone _____ Email: _____
Signature of Responsible Party _____
Signature _____ Date _____

PLEASE NOTE: No financial information will be released to any party, other than Kent Academy and the names above, unless listed below:

Name _____ Relationship _____ Name _____ Relationship _____

Financial and Payment Policies

- For re-enrolling families, their account must be completely paid current at the time of enrollment and they must re-enroll by February 15, 2019.
After this time, any classroom vacancies are open to the public and new enrollment fee is applied.
- The Enrollment Fee of \$1000 is due at the time of initial or re-enrollment. All students are required to pay 100% of the Enrollment Fee, regardless of time of enrollment or withdrawal. No discounts or refunds will be issued for this fee.
- Choose one of the following options for paying fees.
 - OPTION 1 Full Membership payment of \$14,000 due by June 1, 2019 with \$700 discount for early payment
 - OPTION 2 Two semester payments of \$7,000 due August 1, 2019 and \$7,000 January 1, 2020
 - OPTION 3 12 Monthly payments of \$1,166.66 June 1, 2019 through May 1, 2020
 - OPTION 4 Entrance/Payment Start Date after June 1, 2019 – Full Membership payment of \$ _____
 - OPTION 5 Entrance/Payment Start Date after June 1, 2019 :
Monthly payments of _____ based on a __ month scale due _____, 2019 through May 1, 2020
 - OPTION 6 Entrance/Payment/Start Date after June 1, 2019
Full Tuition must be paid for remainder of the school year \$ _____
- June 1, 2019 is the cut-off date for a family to withdraw without being responsible for fees for the 2019-2020 school year. Payment obligation or reimbursement (if Membership has been paid in full) refund policy is as such:**
 - * Application, and Enrollment fees are non-refundable
 - * Families withdrawing June 2019 - August 2020 are responsible for 33% of these charges
 - * Families withdrawing during September 2019 - December 2020 are responsible for 66% of these charges.
 - * Families withdrawing January 2020 - end of school year are responsible 100% of these charges.

Same policy applies if student is expelled or terminated for any reason.
- Kent Co-Op families may pay fees in full by check, cash or automatic draft. Automatic draft is required for all other payment options.
- Accounts not paid by the 5th of the month will be charged \$15 a day for missed payment for up to 30 days (unless arrangement for payment is made). There is a \$35 return check fee for any insufficient funds. There will be a charge for any attorney's fees necessary to collect any balance due.



7. If any account becomes more than 30 days past due, the student will be subject to removal from class until the account is made current or arrangement for payment has been made with Kent Co-Op. Records and transcripts will be held by Kent Co-Op for past due accounts until the past due balance is paid in full or acceptable arrangements are made with the director of the Co-Op.

8. Membership payments are calculated on a monthly basis and are not pro-rated. If a student withdraws during the school year, fees are charged as stated above in section 4 of Financial and Payment Policies and payment is due in compliance with the Kent Co-Op refund policy. **If a student enrolls after the school year has started, at any point in a given month, fees are due for that entire month.**

9. If there is any indebtedness to Kent Co-Op, re-enrollment will be denied and transcripts will not be released. Indebtedness includes any past dues or fees, damage charges or unreturned equipment. Kent Co-Op will consider all accounts that are 90 days over due to be delinquent and will turn these accounts over to a collections agency if an effort has not been made by the student's family to resolve such an account.

10. A 30 day notice is required for students to withdraw from Kent Co-Op.

I hereby register my student(s) to attend the Kent Co-Op and complete the entire school year. In making this registration, I agree to comply with the financial policies of Kent as detailed above. I understand this is a binding agreement with Kent and know the Co-Op's financial commitments and teacher salaries are dependent on my follow through of this agreement.

X

Signature of Parent or responsible party

I understand that my student will be taught accordingly to the philosophy of Kent. I understand the Co-Op nurtures faith, family, community and Grace. It is my desire to support this philosophy in the education and parenting of my child(ren).

X

Signature of Parent or responsible party