

Allison Academy

1881 NE 164th St.

N. Miami Beach, FL 33162

Tel: (305) 940-3922 Fax: (305) 940-1820

ENROLLMENT CONTRACT

I/we enroll _____ in the _____ grade for the 2018-19 school year beginning on August 16, 2018.

FEES AND PAYMENTS—In consideration of the acceptance of this contract by Allison Academy, the undersigned agrees to pay the required tuition fees as follows:

June 3, 2018:	\$450	Registration fee – <u>Non-refundable</u> (\$400, if paid by May 3rd)
July 1, 2018:	\$600	Computer/book/supply fee
July 20, 2018:	\$1000	1 st Tuition Payment/Deposit (Total Tuition is \$17,000)
August 1, 2018	\$150	Activity Fee
August 1, 2018	\$120	Field Trips (local):
August 20, 2018- May 20, 2019:	\$1600	2 nd through 11 th Tuition Payments
PTO Dues:	\$60	

I understand that if my child leaves Allison Academy before the school year ends, I am responsible for the year's tuition AS DETERMINED BY ALLISON ACADEMY. There is a \$500 withdrawal fee when leaving early. I also understand that I am responsible for purchasing my child's uniforms and paying any necessary miscellaneous fees at the beginning or during the school year.

Payments can be made to Allison Academy in full by the year, by the semester, by the quarter, or monthly on the 20th of the month from July through May. If payments are not received on time, such overdue amounts will be assessed a late payment penalty of \$50. All returned checks will be assessed a charge of \$50.

If payments are not received by due date, ALLISON ACADEMY reserves the right to institute legal action to enforce its rights, in which event Parent(s) or Guardian(s) will be responsible for interest, all costs of collection, including reasonable attorney's fees. Payments not made by the 1st of the month will result in the student not being allowed to attend school unless prior arrangements have been made with ALLISON ACADEMY. Venue of any legal proceedings shall be in Miami-Dade County, FL USA. *Furthermore, I agree to the policy of the School that all student records remain the property of Allison Academy until the account is paid in full. The administration reserves the right to expel a student who cannot accept the code of conduct. Any action by a student and/or student's parents, which seriously interferes with Allison Academy's ability to accomplish its goals, may be grounds/ sufficient cause for immediate dismissal.*

RULES AND REGULATIONS—I agree to accept the rules and regulations adopted by Allison Academy and set forth in its latest publications. I understand that this contract authorizes Allison Academy to use my student's physical likeness/images for publicity or advertising purposes. I understand that parents shall be responsible for all breakage/damage to school property caused by the student over and beyond ordinary wear and tear. It is my specific intention that a representative of the School may designate authority for emergency medical care in a licensed hospital while my child is enrolled at Allison Academy.

Allison Academy practices a non-discriminatory policy and does not discriminate on the basis of disability, race, color, creed, ethnicity, national origin, or sexual orientation/identity

IF BOTH PARENTS are living, BOTH must sign this contract. Otherwise, the child's guardian and person having financial responsibility for this contract must sign.

Signed _____ Date _____

Print Name _____

Social Security Number _____

Signed _____ Date _____

Print Name _____

Social Security Number _____

Accepted by: ALLISON ACADEMY _____ Date _____