2016-2017 **Grades 1-12**Re-Enrollment Application and Financial Contract

The NON-REFUNDABLE Registration Fee must accompany each application.

Re-enrollment deadline is **Friday**, **February 19**, **2016**, to reserve a place for your child. Application must be completely filled out to be processed.

| Student ONE FORM PER STUL   | DENT - PLEASE PRINT   |  |  |
|---|---|--|--|
| Date  | Grade in 2016-2017  |  |  |
| Name<br>Last First  | Middle Preferred  |  |  |
| Home Address  |   |  |  |
| Street City   | State Zip Code County   |  |  |
| Home Phone  | Date of Birth   |  |  |
| Father/Guardian   | Mother/Guardian   |  |  |
| Name(Dr./Mr.Rev.) Cell Phone Number Home Address (only if different from student's) | Name(Dr./Mrs./Ms./Rev.) Cell Phone Number Home Address (only if different from student's)   |  |  |
|   |   |  |  |
| Email Address   | Email Address   |  |  |
| Occupation  | Occupation  |  |  |
| Place of Employment □ Owner   | Place of Employment □ Owne  |  |  |
| Work Phone Number   | Work Phone Number   |  |  |
| Graduate of SCPS □ No □ Yes Year  | Graduate of SCPS □ No □Yes Year   |  |  |
| Other/Guardian  | Other/Guardian  |  |  |
| Name  | Name  |  |  |
| Home Address (only if different from student's)                                     | Home Address only if different from student's)  |  |  |
| Cell Phone Number   | Cell Phone Number   |  |  |
| Email Address   | Email Address   |  |  |
| Graduate of SCPS □ No □Yes Year   | Graduate of SCPS □ No □Yes Year   |  |  |
| Siblings  | Transportation  |  |  |
| Please list each sibling attending SCPS  NameGrade                                  | *Transportation Request: (standard or one-way)  ☐ Savannah/Pooler Area  ☐ Midway/Richmond Hill  |  |  |
| NameGrade   | Pt Wentworth/Effingham/SC Shuttle Campus-to-Campus Shuttle  If pick-up and/or drop-off are different from home address, complete (Pick-up/drop-off change are made ONLY IF they fit the existing routes): |  |  |
| Name Grade  | A.M. Pick-up  |  |  |
| Office Use Only: RF FCBB  | P.M. Drop-Off   |  |  |

## STUDENT PLEDGE

|   |  | •   | hese requirements.   |
|---|--|---|--|
| Date  | Signed Student App   | icant (grades 3-12 only)  |  |
|   | USE OF STUDENT'S IMAGE   |   |  |
| purposes, including the SCPS  | ay be included in photographs, vidoetapes, audio tapes or other record<br>S website and social media outlets. I give the SCPS_administration pe  |   |  |
| To ca   | A blank response will be interpreted as "ye omplete a "no" response a recent photo, for identification purposes, m   |   |  |
|   | FINANCIAL CONTRACT FOR RE-ENROLI   | MENT  |  |
| return the Contract to the Sonon-refundable. A student is   | other responsible persons should read all of the provisions of this Cochool Office together with the Registration Fee (\$350 by <b>February 1</b> accepted for enrollment when the Contract and Registration Fee have urned upon your request. No amendment to this Contract and no alterated  | <b>9th</b> : \$550 after <b>February 19th</b> ).The e been delivered to the School and o  | Registration Fee i   |
| any additional fees incurred  | otance of this Contract by Savannah Christian Preparatory School, the and agree to be bound by the provisions of this Contract. So long than the dates listed on the fee sheet. Re-enrollment is conditioned up  | as tuition and fee payments are no  |  |
| <ol> <li>A non-refundable Reg</li> <li>Your obligation for the outlined in the School's</li> </ol>  | of the current academic year and in good financial standing with the <b>distration Fee</b> (\$350 by <b>February 19th</b> : \$550 after <b>February 19th</b> ) ruition is incurred when the student begins school; however, tuition Fee Sheet. A \$200.00 late fee will be assessed on accounts not paid of the tare included as part of this Contract by reference.   | nust be attached to this Contract.<br>payments must be received on or b   |  |
|   | ering school after the start of the school year will be as follows:  Enrolling during the 1st quarter – full tuition  Enrolling during the 2nd quarter – 3/4 tuition   | <u>Grades 1-12</u><br>\$8.862<br>\$6,647  |  |
| E If an account becomes a   | Enrolling during the 3rd quarter $-\frac{1}{2}$ tuition  Enrolling during the 4th quarter $-\frac{1}{2}$ tuition bast due, the student may be withheld from classes until the delinquence  | \$4,431<br>\$2,216  | id within on   |
| •   | , the student will be dismissed.   | is paid. If the delinquency is not pai  | u within an  |
| this purpose, a month is the transportation fee is the yearly fee. The approximate 7. The obligation to pay tu 8. The School is entitled to 9. Report cards, test result 10. Payment Plans: One in Plan A (lump sum particular payments of a "sult through May, 2017, incur a \$25 per modulater date in conjuct Student will be removed from payments may be accepted 11. Signing this Contract in | ws for any reason (voluntarily or involuntarily), tuition is owed for a 20 school days. If the student rides a bus and withdraws or cancels to sowed for the month(s) enrolled plus two additional months. The old repriate credit(s) will be applied to the student's account and a refundition and fees in accordance with School policy is unconditional. To be reimbursed for any attorney's fees and costs incurred in the collects, diplomas, and transcripts are held until all tuition, fees, and other must be selected.  The application of the action of the action of the student's discount. The action of the selected of the se | ansportation for any reason (volunta digation for tuition and/or transporta dicheck will be issued when applicable ection of any unpaid balance. Obligations to the school are paid in eased tuition portal. Payments are proported to the property of up to 2.75%. Instruction by stated deadlines. If space is stigessed. | trily or involuntarily tion will not excee ble.  full.  c payments require possed June, 2016 rocessed manualles will be mailed at till available, tuitio |
| Bill to:  | Street Address   | City  | State/Zip  |
| Both signatures r   | equired.   | •   | - C.C.C.   |
| Date Received by SCPS:  | By:  |   |  |
| DateS   | igned  | Relationship ——— to student   |  |
|   | Father/Guardian or Responsible Person  | Relationship  |  |
| _   | igned  | to student  |  |