



Vann Drive CHRISTIAN ACADEMY

2155 Vann Drive • Jackson, Tennessee 38305
731.661.9958 • www.VannDriveChristianAcademy.com

Financial Policy

Both parents or guardians responsible for payments must read all provisions of this Contract, complete the required information, and sign and return the Contract to the office along with a non-refundable Registration Deposit of \$_____. A student is accepted for enrollment or re-enrollment when this signed Contract has been delivered to Vann Drive Christian Academy(VCA), and has been countersigned and dated by the administration. A copy of the accepted contract will be returned to the undersigned prior to the start of the school year.

Student's Name _____ Grade Entering _____ Date _____

In consideration of the acceptance of this Contract by VCA, the undersigned agrees to pay the required TOTAL TUITION for the full academic year and any additional fees incurred, and agrees to be bound by the provisions of this Contract.

Enrollment and Re-enrollment Terms:

1. Successful completion of the current academic year, and recommendation by VCA, is required for re-enrollment of currently enrolled students.
2. The non-refundable Registration Deposit must accompany this Contract. Tuition payments must be received by VCA on or before each due date. Students entering the school after the start of the school year will be prorated based on the month in which they entered.
3. Acceptance of enrollment constitutes an agreement to pay the full academic year's account, comprising TOTAL TUITION and all related fees and expenses of the student. VCA is entitled to be reimbursed for any attorney's fees and costs incurred in the collection of any unpaid balance.
4. Textbook fees must be paid in full before a student is permitted to attend classes. This may be altered only by prior written approval by the administration.
5. All or part of the tuition may be paid in advance; however, it must at least be paid in such a way that it is not delinquent based on a 10-month payment plan (August-May). Each monthly payment is due on the 1st of each month; an account is considered delinquent if it is not paid by the 10th of the month. The first payment of the school year is due by the first day of school. A late fee of \$30 will be charged on a delinquent account. If an account becomes past due for a period of 90 days from the due date, the student will be withheld from classes until the delinquency is corrected or VCA receives an acceptable security against the delinquency. If the delinquency is not corrected within an additional 30 days, the student will be dismissed from VCA.
6. Transcripts will be held for students until all unpaid tuition and fees are received.
7. The student and student's family agree to comply with and be subject to VCA's rules and policies as set forth in the Parent-Student Handbook.

By signing below, all parties agree to the policies outlined above.

Father/Guardian	_____	_____	____/____/____
	Printed Name	Signature	Date
Mother/Guardian	_____	_____	____/____/____
	Printed Name	Signature	Date

Please complete the following Student-Parent information. All of the following information is important to the school and needed on a yearly basis. Addresses and phone numbers must be kept current for the office directory. Please be as complete as possible. Your cooperation is most appreciated.

Student's Information

Last Name _____ First _____ Middle _____
Date of Birth ____/____/____ Social Security Number____-____-____
Gender(circle one): M F
Home Address _____
City _____ State _____ Zip _____ Home Phone ____-____-____

Father's Information

Title _____ Last _____ First _____ Middle _____
Home Phone ____-____-____ Cell ____-____-____ SSN ____-____-____
Employer _____ Position _____
Work Phone ____-____-____
Work Address _____
City _____ State _____ Zip _____
Home Address (if different from Student's) _____
City _____ State _____ Zip _____

Mother's Information

Title _____ Last _____ First _____ Middle _____
Home Phone ____-____-____ Cell ____-____-____ SSN ____-____-____
Employer _____ Position _____
Work Phone ____-____-____
Work Address _____
City _____ State _____ Zip _____
Home Address (if different from Student's) _____
City _____ State _____ Zip _____

If parents are separated or divorced, to whom shall we send the following?

General correspondence: ____Father ____Mother ____Both

Copies of report cards: ____Father ____Mother ____Both

Billing: ____Father ____Mother ____Both

Name _____ Address _____

City _____ State _____ Zip _____ Phone ____-____-____

Tuition payments are due the 1st of every month. Payments will be considered late on the 11th, and an additional late fee will be assessed.