



Five Day PK4 Enrollment Contract 2018-2019

By signing and returning this contract and enrollment fee, we, the parents and/or guardians of the below named enrollee, acknowledge and agree to the following:

Student's Name: _____

Is hereby enrolled at Grace Episcopal Day School for 2018-2019 in **Five Day PK4**.

I agree to pay the tuition and fees as indicated below:

- **Total Tuition \$6,355**

I enclose the required, non-refundable deposit of \$300 by February 23, 2018, or within two weeks of acceptance offer; or \$450 after February 23, 2018, or after two weeks of acceptance offer. The deposit is in addition to the tuition for the school year.

- I understand Grace Episcopal Day School (the "School") reserves the right to deny enrollment to a student whose academic performance or conduct does not satisfy School requirements. The student must successfully complete the current school year in good standing, both academically and behaviorally, which shall be determined at the sole discretion of the School. The undersigned Parent/Guardian agrees that this enrollment contract is subject to the obligations, conditions and financial terms contained in this contract and on the School's website at www.geds.net. By the presentation of this contract and its acceptance by the School, the undersigned Parent/Guardian assumes the responsibility for the payment of all charges and agrees to the rules and regulations of Grace Episcopal Day School.
- Students are enrolled for the full academic year and no adjustment of tuition or fees can be made by the School for absences, withdrawal, or dismissal unless a written request is received by the Director of Admissions by May 1, 2018. Any unpaid balance for the entire year is due and payable to the School upon the student's withdrawal.
- Tuition payments are due to Blackbaud Smart Tuition™ beginning **June 1, 2018**. A late fee of \$40 per month will be assessed by Blackbaud Smart Tuition™ for any delinquent account. Students with delinquent accounts will be subject to dismissal from school. Transcripts will be held for the student until all unpaid tuition and fees are received.
- Grace Episcopal Day School assumes no responsibility for the collection of amounts due from any person or agencies other than the persons whose signatures appear below.
- All tuition and fees must be current as of the first day of school, in order for the student to attend class.
- The Episcopal Diocese requires any person volunteering on a regular basis, accompanying students on field trips, and/or working in any capacity at Grace Episcopal Day School to complete Safeguarding God's Children training.

We agree to the terms herein and acknowledge, understand, and agree the student, parents, and/or guardians shall adhere to all regulations, policies, and rules of Grace Episcopal Day School.

Signature of Parent 1 or Guardian: _____ Date: _____

Signature of Parent 2 or Guardian: _____ Date: _____

If another party, not a parent or guardian, is responsible for payment:

Name of Person Responsible for Tuition (Please Print): _____

Signature of Person Responsible for Tuition: _____ Date: _____

Billing Address: _____

Street

City

State

Zip

Grace Episcopal Day School provides a program of academic excellence while preparing children to live responsible lives in a community grounded in the Christian faith. Through care and nurturing, Grace inspires learning, builds confidence and promotes a desire to succeed.

Christ • Education • Family

Terms and Conditions of Enrollment

The Parent/Guardian recognizes that this enrollment contract is for the entire School year and agrees that the School may require the withdrawal of or dismissal of any student if, in the School's sole discretion, it concludes that such student's attitude, influence, progress, or behavior does not serve the best interests of the School. The undersigned Parent/Guardian also understands that a positive and constructive working relationship between the School and a student's parents (or guardian) is essential to the fulfillment of the School's mission, and agrees that the School may terminate enrollment or decline to re-enroll a student if the School concludes that the student's parents or guardians have engaged in conduct which is detrimental to the school or who do not abide by School policies. In the event the School expels a student, no part of the year's tuition will be refundable, and all payments due up to the date of expulsion, plus any remaining tuition balance are considered due.

Successful completion of the current academic year and recommendation of the School is required for re-enrollment of currently enrolled students, even after this contract is returned to the School. The School shall decide in its sole discretion whether a student has successfully completed the school year, and such determination may include non-academic considerations.

Withdrawal Policies

The Parent/Guardian understands that he/she is responsible for 100% of the tuition according to this Contract regardless of reason for or date of withdrawal.

Teacher employment and other significant commitments are made by the School based upon enrollment. Therefore, if a student is withdrawn from the School, full payment of tuition and fees for the entire school year shall be due and payable.

Financial hardship does not relieve the Parent/Guardian's obligation to fulfill the terms of this contract. However, should a family experience a substantial change of circumstances, the School recommends that you petition the Scholarship Committee for accommodation.

Additional Charges

The Parent/Guardian agrees to pay additional charges for enrollment in Blackbaud Smart Tuition™ [all families], a Technology Fee for 5th and 6th grade students, After School Activity fees, late pick-up fees, lost/damaged books, out of town field trips, certain electives and insufficient funds fee.

Adjustments

The School reserves the right to make adjustments to the school calendar to complete an academic year, as necessary, either by cancelling or adding school days due to factors deemed in the best interest of the school, or to forces beyond its control. Such forces beyond the school's control include, but are not limited to, closures due to pandemic virus in the school or community, destruction of facilities due to fire, weather or other factors, other threats to the safety of students, national emergencies, and other issues that cause the school's Administration and/or Board to decide that a temporary closure is in the best interest of the school and/or students. Adjustments to the school calendar may include requiring students to make up missed days on planned breaks from school or by extending the school year into the summer months.

Unconditional Obligation

The Parent/Guardian acknowledges that unless enrollment is cancelled in writing prior to the cancellation deadlines stated in this contract, and if there are no withdrawal conditions as outlined above, the undersigned parents/guardians assume full legal and financial responsibility to pay tuition for the full academic year. The Parent/Guardian further agrees and understands that no refund or remission of tuition shall be made by the School for any reason whether due to absence, dismissal, school closure due to inclement weather or pandemic flu outbreak, acts of God, government action, terrorism, or epidemics, or withdrawal for disciplinary, academic, or personal reasons, and that upon dismissal or withdrawal, any remaining balance on the student's account becomes due and payable.

Disputes

When accounts are past due by thirty days, the School will begin collection proceedings and will deliver written notice to the undersigned that the accounts are past due and must be paid; such communication will include a deadline for the outstanding balance to be satisfied. An account two months past due will have all grades blocked for families and the students until the balance is paid or an agreement with the School's business office is met. If a past due account is not satisfied following the deadline contained in the written notice, then the School has the option to cease all education services, will deny admission to classes, and will withhold grades/transcripts/graduation privileges until any outstanding accounts have been paid in full. The School may withhold offering enrollment contracts or may rescind an enrollment contract for the next academic year to families with overdue accounts. In addition, the undersigned agrees to pay, to the extent permitted by law, the School's expenses of enforcement and collection of tuition and any additional charges incurred by the family of the School including, without limitation, attorney's fees and costs. If parents subpoena the school or seek to depose an employee, the costs associated with those activities will be billed to the parents.

Any and all disputes will be governed by the laws of the State of Florida.



Grace Episcopal Day School Student Enrollment Form 2018/2019 School Year

Grace Episcopal Day School admits qualified students of any race, creed, color, gender, or national origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school.

Student Name _____ **Grade** _____

Home address _____

City _____ State _____ Zip _____

Home Phone _____

Parent 1 _____ Mobile# _____ Work# _____

Email Address _____

Parent 2 _____ Mobile# _____ Work# _____

Email Address _____

Address (if different from above) _____

City _____ State _____ Zip _____

Parents' marital status married separated divorced other _____

Child lives with both parents mother father other, explain _____

Who has legal custody? both parents mother father other, explain _____

Who will be financially responsible to the school? both parents mother father other, explain _____

Are there any court orders or agreements addressing custody or rights of the parent regarding visitation and decisions regarding the child? no yes If yes, please provide a copy of the current court order(s) after acceptance to complete the enrollment process.

Emergency/Authorized Pick Up Information, in case parent(s) cannot be reached:

Contact 1 Relationship Phone _____ E P/U

Contact 2 Relationship Phone _____ E P/U

Contact 3 Relationship Phone _____ E P/U

Contact 4 Relationship Phone _____ E P/U

Physician's Name _____ Phone _____

Does your child have any medical conditions or allergies? Yes No
If yes, you will be required to complete the Medical Action Plan form.

I give my permission for Grace Episcopal Day School and its appointed staff to obtain treatment for my child, _____, in the event of an emergency medical situation.

Parent 1 Signature _____ Date _____

Parent 2 Signature _____ Date _____

I authorize permission for my child, _____, to attend school sponsored field trips. Authorization is required by both parents. If the parents do not mutually agree, then both parents will have to provide permissions for each field trip or the student cannot participate.

Parent 1 Signature _____ Date _____

Parent 2 Signature _____ Date _____

Family Handbook Acknowledgement:

Please be advised that the policies in this handbook are subject to change without prior notice, in the interest of ensuring that the service Grace Episcopal Day School provides meets the ever-changing needs of our students.

I/We acknowledge receipt of an e-copy of the Grace Family Handbook and agree to abide by the policies/guidelines outlined in the Family Handbook.

Student Signature _____ Date _____

Parent 1 Signature _____ Date _____

Parent 2 Signature _____ Date _____

I give permission for the inclusion of my address and phone number on a class roster. These lists will be used exclusively for Grace Episcopal Day School. Yes No

Parent 1 Signature _____ Date _____

Parent 2 Signature _____ Date _____

I understand photographs may be taken of my child. I give permission for Grace Episcopal Day School to use these for the school yearbook, social networks, and school promotional purposes. Yes No

Parent 1 Signature _____ Date _____

Parent 2 Signature _____ Date _____

Grandparent information will be used for invitations to Grandparents Day and special events.

Paternal grandparent's name _____

Address _____

City State Zip _____

Home phone _____ Email _____

Maternal grandparent's name _____

Address _____

City State Zip _____

Home phone _____ Email _____

Episcopal Church Membership Yes No (This information is requested for the National Association of Episcopal Schools report.)

Student Race/Ethnicity (Optional) This information is requested for our annual accreditation report:

- African American Caucasian / non-Hispanic Hispanic/Latino Asian American
 Native American Multiracial American Middle Eastern American International Other

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