



INDEPENDENCE CHRISTIAN SCHOOL
4905 E. La Palma Ave. Anaheim Ca. 92807

**YEARLY PAYMENT WORKSHEET
AND AGREEMENT
2011-2012 School Term**

Please fill this form out completely. Use the information found on the Schedule of Rates. Remember, all prices are based on yearly tuition, daycare and fees. I.A.P. Fees are added to tuition as determined by your Child Study Team.

FINANCIAL OFFICE USE ONLY	
Paid Deposit \$ _____	Tuition \$ _____
Daycare \$ _____	I.A.P. \$ _____
Aid \$ _____	Fees \$ _____
Total \$ _____	
FACTS CONTRACT COMPLETED <input type="checkbox"/>	

PLEASE PRINT

Name of parent (s)/guardian (s) to whom **billing information** is to be sent:

FATHER'S FIRST NAME: _____ LAST NAME _____

MOTHER'S FIRST NAME: _____ LAST NAME _____

STREET ADDRESS _____

CITY: _____ ZIP CODE _____ HOME PHONE _____

FATHER'S PHONE _____ MOTHER'S PHONE _____

Payment Worksheet

CHILD'S NAME	GRADE	TUITION	DAYCARE	I.A.P.	FEES	TOTAL DUE

Parent Payment Agreement

I/We understand that the annual cost of education can be paid: in full (due no later than July 1st or at time of enrollment)
 semi-annually (enrollment date and February 1)
 or divided into equal monthly payments for: 12 months (beginning July 5th)
 11 months (beginning August 5th)
 10 months (beginning September 5th)

I/We understand that Independence Christian School does not make any refunds on tuition and registration. Any payments received after the monthly due date, will be assessed a 10% late charge by Independence Christian School. Late charges are due and payable within 30 days. **Any account in arrears is subject to denial of fieldtrip participation, applying fieldtrip fees to the account in arrears, ineligible for student awards, withholding school services, incomplete report cards, termination of enrollment, collections, and judicial judgment until the account is cleared.** ALL PRICES SUBJECT TO CHANGE AS SERVICES VARY.

RESPONSIBLE ADULT SIGNATURE _____ DATE _____

CO-RESPONSIBLE ADULT SIGNATURE _____ DATE _____