



WINTER HAVEN CHRISTIAN SCHOOL

Tuition Payment Options – Only one needed per family

PLEASE SELECT ONE OPTION – SIGN BELOW AND RETURN WITH APPLICATION

☐ **OPTION #1** Pay tuition **in full** by June 3, 2019 and receive a 4% discount.

☐ **OPTION #2** Pay tuition **in full between June 3, 2019 and the first day of school and receive a 2% discount.** When the contract is signed, the parent must pay in full at that time or set up a monthly payment beginning immediately until the full amount can be paid.

☐ **OPTION #3** **Semi-annual payments** with the **first payment due June 3, 2019 and the second payment due December 2, 2019.** (No discount; 5% late fee)

Two payments of \$_____

☐ **OPTION #4** Monthly payments made to Smart Tuition. **Payment is considered late on the 10th of each month.**

a. ☐ Eleven month plan **beginning June 1, 2019 and ending April 1, 2020.**

b. ☐ **If registration occurs after June 1, 2019 monthly tuition payment amounts will be calculated so that the last payment will be May 1, 2020.**

☐ **OPTION #5** This option is for parents who have to pay summer day care elsewhere. Payments can begin on August 1, 2019. This option only allows a 10 month plan from August 1, 2019 to May 1, 2020.

Name of Summer Day Care _____ Phone _____

If **Option #4** or **Option #5** is selected, all payments will be processed through our vendor Smart Tuition. **All payments are due on the 1st of the month and are considered late on the 10th of the month.** WHCS will assess a \$15.00 late fee for all late payments and a \$25.00 fee for any returned checks. This is in addition to any fee your bank may charge for insufficient funds in your account. **Smart Tuition will also charge additional late fees for late or returned payments as per their policies.**

I understand these options and my obligation to pay my child's tuition by one of the options described above to Winter Haven Christian School. **(Both signatures required where both parents are legal guardians.)**

_____/_____
Parent Signature Print Name Date

_____/_____
Parent Signature Print Name Date

Names of Student(s) – Please Print – List Oldest First Grade(s) Reg. Fee Yearly Tuition Yearly Extended Care
