



PROVIDENCE
BIBLE-BASED INTERNATIONAL PREPARATORY SCHOOL

Providence International Christian Academy Enrollment and Tuition Agreement for School Year 2021-2022

Parents' or guardians' names _____

Phone _____ Cell _____ Billing Email _____

Billing Address _____

Student Names (attending PICA) (Preference)	Age	DOB	M/F	Grade
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____

Fee information

1. A non-refundable annual **per child** enrollment fee is due with this form. (*Returning \$100, see re-enrollment form early reg. schedule*), (New \$150 by April 20, \$200 by May 20, \$250 thereafter)
2. Diagnostic testing is required one time only. Fee: \$125 (New students only)
3. A minimum of 8 hours of Parent Participation per family is required **each quarter**. A fee of \$10 per uncompleted hour will be assessed (drive for trips, volunteer for clean-up or repairs on weekends, bring in merit prizes, attend informative classes, volunteer in learning center, provide Green Dot treats, Attend Parent/Teacher fellowship meetings, volunteer at PICA, etc.)
4. Payments not received by the 10th of the month are late. A late fee of \$50 will be added each month payment is in arrears.
5. Discounts will be forfeited on payments made past the 10th of each month.

Tuition information

Grade Level	No. of students	Yearly Tuition	No. of Installments	Installment Payment	Total
Kindergarten to 6 th Grade		\$5,100.00	<input type="checkbox"/> 12 <input type="checkbox"/> _____	\$425.00	
Seventh to Eighth Grade		\$5,700.00	<input type="checkbox"/> 12 <input type="checkbox"/> _____	\$475.00	
Ninth to Twelfth Grade		\$6,180.00	<input type="checkbox"/> 12 <input type="checkbox"/> _____	\$515.00	
Additional Support needed (<i>ESL, Special Needs, Special Ed, Etc.</i>)		\$1,620.00	<input type="checkbox"/> 12 <input type="checkbox"/> _____	\$135.00	
Curriculum Fee K- 6 th Grades		\$800.00	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	\$200.00	
Curriculum Fee 7 th - 12 th Grades		\$800.00	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	\$200.00	
Regional Student Convention (ages 9-19)		\$135.00			
HS Graduation Fee		\$375.00			
SUBTOTAL					
<input type="checkbox"/> Sibling Discount (\$-50.00 monthly) <input type="checkbox"/> 3% Discount (paid in one lump sum) <input type="checkbox"/> 1½% discount (quarterly installments)					
<input type="checkbox"/> Scholarship \$ _____ (attach form)		Amount Discounted \$ _____			
GRAND TOTAL					
Additional Services: <input type="checkbox"/> Work Exchange Program (based on availability)				Family discounts available.	
<input type="checkbox"/> After School Tutoring, M-Th (\$25/hour; \$100-\$200 per week)					
<input type="checkbox"/> Transportation (\$15 1-way; \$30 round trip; \$75 weekly, 1-way; \$150 weekly, round trip) Subject to availability and length of trip.					

For my child's continued enrollment: (please initial next to each sentence as indication of comprehension)

- ____ I agree as a condition of enrollment in PICA to pay tuition and fees as outlined below.
- ____ I understand that these fees are due and payable to the school administration office in order for my child(ren) to remain in the school.
- ____ I understand that the total yearly tuition is an annual fee and is broken down into monthly installments.
- ____ If I am unable to pay the full amount by the tenth of the month, I shall forfeit the scholarship and/or discount for that month therefore the full tuition must be rendered unless a bi-weekly arrangement has been made.
- ____ I understand that the overhead expenses of the school do not diminish if a student departs during the course of the year.
- ____ Accordingly, I acknowledge that my obligation to pay fees for the full academic year is unconditional after the acceptance of this contract by the school or by July 1st, whichever is later, and no deduction or remission of tuition cost is allowed by the school for absence, dismissal, or withdrawal for disciplinary, academic, or personal reasons.
- ____ Should the account fall behind 45 days, I understand that my child will be on academic suspension and will not be allowed to return until the account is current.
- ____ I understand that a 3% handling charge will be assessed to non-tuition payments paid through PayPal or by credit card (as available).
- ____ I agree to pay, to the extent permitted by law, the school's expenses of enforcement and collection of the tuition fees and related expenses, including attorney fees and costs.

Parent's or guardian's signature

Date

Paid at registration:

*Registration Fee	\$ _____	
*Diagnostic Testing Fee pp \$ 125.00	\$ _____	New student only
*Curriculum Fee Deposit	\$ _____	<input type="checkbox"/> Yearly, <input type="checkbox"/> ½ & ½ <input type="checkbox"/> 4 Payments - 1st due upon enrollment (July 1, Sept 2, Dec. 2, March 3)
Tuition Installments	\$ _____	# ____ of installments <input type="checkbox"/> Mthly, <input type="checkbox"/> ½ & ½, <input type="checkbox"/> Yrly
**Class Uniforms	\$ _____	All uniforms must be purchased through GA
PE Uniform	\$ _____	\$35.00
Polo Shirts	\$ _____	\$25.00
**Regional Student Convention Entry Fee	\$ _____	\$135.00 per student if applicable
**High School Graduation Fee	\$ _____	\$375.00 per student – Seniors Only
* Required at registration.		
** Required participation.	\$ _____	Total Paid (Receipt _____)

\$ _____ Yearly Total

\$ _____ Amount Paid at enrollment

\$ _____ Yearly Balance Due

Preferred method of payment:

☐ Cash ☐ Check
☐ Credit Card ☐ PayPal