



SCHOOL POLICY CONTRACT ~ _____ - _____ SCHOOL YEAR

Student's Name: (Last, First, Middle) One per family.

1. Daycare families are billed monthly, \$4 per hour for the first child and \$3 per hour for each additional child. Morning daycare is charged from 6:00 am – 7:45 am. Afternoon daycare hours for Kindergarten are 2:00 pm – 6:00 pm, with charges beginning at 2:15 pm. Afternoon daycare hours for grades 1st – 8th are 3:00 pm – 6:00 pm, with charges beginning at 3:15 pm. At 2:15 pm and 3:15 pm, all remaining students automatically go into daycare. Any student left after daycare hours, will be charged a \$25 late fee per hour or any part of an hour. **Using daycare is a privilege, not a right. Students who are not respectful and/or obedient may be denied the privilege of daycare. Initial _____**
2. I/We understand that I/we have an obligation to be actively involved in the education of my/our child. We agree to uphold and support the high academic standards of the school by encouraging my/our child's study habits and ensuring that my/our child completes all homework and other assigned projects.
3. I/We will faithfully support the school through my/our prayers and positive attitudes and, in keeping with the Matthew 18 principle, I/we will share any complaints only with the parties involved.
4. I/We understand that if, for any reason, my/our child does not respond favorably to the school, I/we will do everything in my/our power to cooperate with the school to help my/our child make the necessary adjustments. If these adjustments cannot be made, I/we then agree to quietly withdraw my/our child at the school's request.
5. I/We understand that I/we are responsible to cover the cost of damages to the school, including breakage of windows, book damage, and abuse or misuse of other school or personal property caused by my/our child. **Initial _____**
6. I/We agree to notify Calvary Chapel Rialto Christian School in writing if someone is going to pick up my/our child other than those listed on the emergency information section of this application.
7. I/We agree to support all school and classroom policies as set forth by the Calvary Chapel Rialto Christian School administration and teaching staff.
8. If any of the information in the student's admission application is found to be intentionally untrue, Calvary Chapel Rialto Christian School reserves the right to not enroll the student or to dismiss the student from the school.
9. There are sports fees associated with all extra-curricular organized sports. If my/our child chooses to participate in school sports, I/we will pay all costs associated with each chosen sport.
10. Calvary Chapel Rialto Christian School is authorized to provide religious instruction in accordance with the Statement of Faith and all biblical principles as interpreted by the leadership of Calvary Chapel Rialto and Calvary Chapel Rialto Christian School administration.

I/We understand that every effort will be made to protect and safeguard all students. Therefore, I/we agree not to hold Calvary Chapel Rialto Christian School liable for illness or mishap that may occur to my/our child. I/we will cooperate with the discipline policies as set forth by Calvary Chapel Rialto Christian School, including the detention/referral program. I/We wish to delegate to the school the responsibility of acting in *loco parentis* (in place of the parent) regarding the safety and welfare of the child named above during the hours school is in operation, either formally or informally in extra- curricular activities.

Contracting Parent/Guardian Signature (Circle one: Father / Mother / Guardian)

Print Name

Date

Contracting Parent/Guardian Signature (Circle one: Father / Mother / Guardian)

Print Name

Date





CALVARY CHAPEL RIALTO CHRISTIAN SCHOOL

1391 W. Merrill Ave., Rialto, CA 92376 • (909) 820-9072 • fax (909) 820-7399 • school@ccrialto.org • www.ccrialto.com

SCHOOL PAYMENT POLICY CONTRACT ~ _____ - _____ SCHOOL YEAR

PLEASE CHOOSE ONE OPTION

- Option 1 – \$4,000/year or \$400/month for 10 months.** The monthly payment plan allows ten (10) equal monthly payments totaling the complete amount of the tuition to be paid beginning September 19, with consecutive payments due on the 19th of each month. If the account is not paid before the 26th of each month, a \$25 late fee will be charged to my/our account. **Initial** _____
- Option 2 – \$4,000/year or \$333.33/month for 12 months.** The monthly payment plan allows twelve (12) equal monthly payments totaling the complete amount of the tuition to be paid beginning July 19, with consecutive payments due on the 19th of each month. If the account is not paid before the 26th of each month, a \$25 late fee will be charged to my/our account. *(This option only available if registered by July 2019.)*
Initial _____
- I/We are aware that failure to submit tuition payment within 20 days of the due date may result in the school withdrawing my/our student from all classes until payment is made. **Initial** _____
- It is also my/our understanding that the policy of the school is to make no refunds on Registration and Book fees.**
- I/We are aware that students will not be allowed to re-register or be considered as re-registered if any past tuition or fees are unpaid or delinquent.**
- I/We agree to pay all Registration and Book fees prior to enrollment.
- There will be a \$25 charge assessed to your account for each check returned for non-sufficient funds (NSF). After two NSF checks, only cash, cashier's check or money order will be accepted for payment. **Initial** _____
- The contracting parent is responsible for the payment of all fees and tuition, regardless of who makes the payments. Notification of non-payment of tuition, fees and other charges, as well as NSF checks, will be addressed to the contracting parent. **Initial** _____

Office Use Only – One per family

- ☐ Early Registration ☐ Regular Registration ☐ Option 1 (10 Month Payment Plan) ☐ Option 2 (12 Month Payment Plan)
- ☐ Building Improvement Fees: \$20 per month **OR** ☐ Purchase Scrip that totals \$20 in rebates each month for 10 months. **Initial:** _____

Yearly Tuition \$ _____ Monthly Payments of \$ _____ First Payment Due: _____

Child's Name	Grade	Child's Name	Grade	Child's Name	Grade	Child's Name	Grade
1 st Child –	\$4,000	2 nd Child –	\$3,450	3 rd Child –	Free	4 th Child –	\$2,525
Registration Fees	\$	Registration Fees	\$	Registration Fees	\$	Registration Fees	\$
Books	\$	Books	\$	Books	\$	Books	\$
Placement Test (New Students)	\$	Placement Test (New Students)	\$	Placement Test (New Students)	\$	Placement Test (New Students)	\$
Emergency Kit	\$	Emergency Kit	\$	Emergency Kit	\$	Emergency Kit	\$
Achievement Testing	\$	Achievement Testing	\$	Achievement Testing	\$	Achievement Testing	\$
Total Fees	\$	Total Fees	\$	Total Fees	\$	Total Fees	\$
Amount Received \$		Payment Type:		Date Paid:		Amount Due:	

Copy Given to Parent ☐ **Initial:** _____

I/We will promptly pay all tuition, registration fees, daycare fees, and any other fees or charges as established by the school. I/We are also aware that failure to submit any of the above fees may result in the school withdrawing my/our student from all classes until payment is made. I/We will pay all costs incurred by the school for collection of fees should such actions become necessary.

Contracting Parent/Guardian Signature (Circle one: Father / Mother / Guardian)

Print Name

Date

Contracting Parent/Guardian Signature (Circle one: Father / Mother / Guardian)

Print Name

Date

