



# 2017-2018 DEPOSIT FORM

Please return by March 31, 2017 with Tuition Contract

Student's Name: \_\_\_\_\_ Grade 2017-2018: \_\_\_\_\_

Student's Name: \_\_\_\_\_ Grade 2017-2018: \_\_\_\_\_

Student's Name: \_\_\_\_\_ Grade 2017-2018: \_\_\_\_\_

Enclosed is our family's **nonrefundable** deposit. I understand that the amount remitted will be applied to the tuition for the 2017-2018 school year.

Payment can be made by check or credit card.

	Amount Enclosed
\$475.00 per student	_____
<b>Total</b>	_____

\_\_\_\_\_  
SIGNATURE OF PARENT/GUARDIAN

\_\_\_\_\_  
DATE

FOR NEW FAMILIES ONLY:

Parent #1 Name \_\_\_\_\_ Email \_\_\_\_\_

Parent #2 Name \_\_\_\_\_ Email \_\_\_\_\_

Home Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Check here if you want the tuition deposit to be charged to a credit card. (3% added for fees)

*Credit Card Information*

Name on Card \_\_\_\_\_

Type of Credit Card (circle one): Visa / MasterCard

Billing Address: \_\_\_\_\_

Account number : \_\_\_\_\_

Expiration date (month/year) \_\_\_\_\_

Authorized Signature \_\_\_\_\_