



2018-2019 DEPOSIT FORM

Please return by March 29, 2018 with Tuition Contract

Student's Name: _____ Grade 2018-2019: _____

Student's Name: _____ Grade 2018-2019: _____

Student's Name: _____ Grade 2018-2019: _____

Enclosed is our family's **nonrefundable** deposit. I understand that the amount remitted will be applied to the tuition for the 2018-2019 school year.

Payment can be made by check or credit card.

	Amount Enclosed
\$475.00 per student	_____
Total	_____

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 _____