## 2025-2026 OCONEE ACADEMY CONTRACT

	Accredited	Non-Accredited	
This Homeschooling Contr	_	') is made and entered on n, Director (the "Instructor")	) from Oconee
Learning Center & Acaden the following parent:	ny at 1592 Mars Hill	Road Suite B Watkinsville,	GA 30677 and
(the "Parent")			
_	rent", and the party	g to arrange the homeschool who will be providing the se	_
<b>1. DESCRIPTION OF SE</b> provide educational instruc	· · · · · · · · · · · · · · · · · · ·	g on August 29, 2025, the Ir	structor will
30677. The hours of operat 12:30 p.m.	tion for both the 3 Da	<ul> <li>Hill Road. Suite B. Watking and 5 Day Programs are 8</li> <li>he end of each school day. A</li> </ul>	3:30 a.m
\$1/minute per child will be		•	r charge of
		vill compensate the Instructoryments will be made as follows:	
make payment on the first of late. Other fees and/or experience have been approx Parent in writing. The Instr	month, August-May be applied to all pay of each month will reenses will be paid to tweed in advance by the fuctor shall be solely bayments, disability in	\$	reek payment is sees and/or ehalf of the caxes, Social
payment for services. An a	annual <b>technology fe</b>	of control over the method of \$150 will be billed in to billed in to bill monthly of the billed in the bill monthly of the bil	en

## 3. Payment Authorization Agreement

To ensure a smooth and efficient payment process, OLCA requires all families to have a payment method on file. Parents may choose to keep a debit/credit card (a 3.5% service fee will be applied) or bank account information on file for any necessary payments, including but not limited to:

- Tuition auto-draft payments
- Late fees
- OLCA merchandise orders
- Snack fees
- Other incidental charges

Please select one of the following payment options and provide the required details:
☐ Debit/Credit Card on File
Cardholder Name:
Card Number:
Expiration Date (MM/YY):/
CVV:
Billing Zip Code:
☐ Bank Account on File
Account Holder Name:
Bank Name:
Routing Number:
Account Number:
Account Type (Checking/Savings): ☐ Checking ☐ Savings
By signing below, I authorize OLCA to charge the above-selected payment method for any applicable fees as outlined in this agreement. I understand that I will receive prior notification for any scheduled charges and that it is my responsibility to keep my payment information updated.
Parent/Guardian Name (Print):
Signature:

Date:/	/	
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## **Declined Payments & Fees**

- If a payment is declined for any reason (insufficient funds, expired card, etc.), the parent/guardian will be notified and must update their payment information within 48 hours.
- A \$25 fee will be applied for each declined transaction.
- If payment is not received within 7 days, a late fee of \$30 will be charged. Continued non-payment may result in suspension of services until the account is brought current.

## **Commitment Policy**

By enrolling in OLCA, parents/guardians agree to maintain their payment information on file for the full 2025-2026 academic year, ending May 15, 2026. Payment details will remain on file for the duration of the school year to cover tuition, fees, and any incidental charges.

- Early withdrawal does not exempt families from financial obligations, and all outstanding balances must be settled before the end of the school year.
- Payment information will not be removed before May 16, 2026, unless all financial commitments have been met.
- No refunds will be issued for payments already processed unless there was an administrative error.

By signing below, I authorize Oconee Learning Center & Academy to charge the above-selected payment method for any applicable fees as outlined in this agreement. I understand that it is my responsibility to keep my payment information updated and to notify OLCA of any changes.

Parent/Guardian Name (Print):	
Signature:	
Date: / /	

- **4. TERM/TERMINATION.** This Agreement shall terminate automatically on May 15, 2026. A regular, ongoing relationship of indefinite term is not contemplated. The Parent has no right to assign services to the Instructor other than as specifically contemplated by this Agreement. However, the parties may mutually agree that the Instructor shall perform other services for the Parent, pursuant to the terms of this Agreement.
- **5. RELATIONSHIP OF PARTIES.** It is understood by the parties that the Instructor is an independent contractor with respect to the Parents, and not an employee of the Parents. The Parents will not provide fringe benefits, including health insurance benefits, paid vacation, or any other employee benefit, for the benefit of the Instructor.
- **6. ENTIRE AGREEMENT.** This Agreement constitutes the entire contract between the parties. All terms and conditions contained in any other writings previously executed by

the parties regarding the matters contemplated herein shall be deemed to be merged herein and superseded hereby. No modification of this Agreement shall be deemed effective unless in writing and signed by the parties hereto.

- **7. WAIVER OF BREACH.** Parent agrees to pay the full tuition of the academic year, regardless of whether their child completes the school year or withdraws for any reason. This commitment includes payment of all outstanding fees and charges accumulated up to the point of withdrawal. The school reserves the right to pursue legal action to recover any unpaid fees in the event of non-compliance with this clause. The waiver by the Parent of a breach of any provision of this Agreement by Instructor shall not operate or be construed as a waiver of any subsequent breach by Instructor.
- **8. SEVERABILITY.** Any provision of this Agreement shall be held to be invalid or unenforceable for any reason, the remaining provisions shall continue to be valid and enforceable. If a court finds that any provision of this Agreement is invalid or unenforceable, but that by limiting such provision it would become valid and enforceable, then such provision shall be deemed to be written, construed, and enforced as so limited. **9. APPLICABLE LAW.** This Agreement shall be governed by the laws of the State of
- **10. SIGNATORIES.** This Agreement shall be signed by \_\_\_\_\_ and by Pam Kennon, Director, on behalf of Oconee Learning Center & Academy. This Agreement is effective as of the date first above written.

Georgia.

Oconee Learning Center & Academy		
By:	Date:	
Pam Kennon, Director		
PARENT:		
By:	Date:	