

MATHEMATICS CO-OP

PARENT/TEACHER CONTRACT

PARENT

I, _____ (parent name), acknowledge that by signing this document I agree to enter into a contract for the 2018-19 school year between myself and the course teacher, Donna Dement.

Please initial each of the following:

_____ I understand that attendance is an important aspect of this course and that weekly class attendance is crucial to my child's success.

_____ I understand that weekly homework assignments are an imperative component to the learning process. If my student does not complete the weekly assignments they will not be prepared for the tests, quizzes or class.

_____ I understand that tuition is \$450 for the year, regardless of attendance. Final grade reports will not be released until account is cleared.

Please select desired payment option.

_____ **Annually** – one-time payment of \$450 due by first day of class

_____ **Semi-annually** – two payments of \$225 due by the first day of class each semester

_____ **Monthly** – ten payments of \$45 due by the first class of each month, August-May; there will be a \$15 late fee accessed if payment is not received by due date and student will not be allowed to attend class until payment is made.

Cash and Pay Pal are accepted.

TEACHER

- agrees to keep an accurate accounting of fees paid and receipt all payments
- agrees to keep an accurate record of student grades
- agrees to come to class each week on-time and prepared
- agrees to make herself available by phone, text and email during the duration of the course during daytime hours
- agrees to communicate regularly through email concerning this course
- agrees to provide a suggested grade report at the end of the each quarter and semester providing account is current

Student Name _____ Grade _____

Address _____

City _____ ST _____ Zip _____

Parent Phone _____ Parent Email _____

Student Phone _____ Student Email _____

Parent Signature _____ Date _____

Teacher Signature _____ Date _____