

# Rock Church Academy Financing Plan



## Parent Contact/ Billed Party

Full Name: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_  
 Billing Address: \_\_\_\_\_  
 Primary Email Address: \_\_\_\_\_ Secondary Email: \_\_\_\_\_

## Payment Method/Frequency

I authorize Rock Church Academy to automatically debit payments from the account listed on this payment contract. I understand that payments cannot be adjusted or refunded. I also understand that I am responsible for all fees associated with my account if I were to have non-sufficient funds. \_\_\_\_\_(Initials)

### Checking/ Savings (Free)

Please Debit My : Checking Account (attach voided check) Savings Account  
 Name of Bank: \_\_\_\_\_ Account # \_\_\_\_\_ Routing # \_\_\_\_\_

### Credit/ Debit Card (3% additional fee applies to all Credit/Debit card payments)

Please Charge My: AMEX DISCOVER MASTERCARD VISA  
 Card Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Expiration: \_\_\_\_\_ / \_\_\_\_\_ Security Code# \_\_\_\_\_

## Student Information ( Sibling Discount 5% Each Additional Child After 1<sup>st</sup> Enrolled Tithing Member of Rock City Church 10%)

Student 1: Full Name: \_\_\_\_\_ Grade entering in Fall: \_\_\_\_\_ Tuition \$ \_\_\_\_\_  
 Student 2: Full Name: \_\_\_\_\_ Grade entering in Fall: \_\_\_\_\_ Tuition \$ \_\_\_\_\_  
 Student 3: Full Name: \_\_\_\_\_ Grade entering in Fall: \_\_\_\_\_ Tuition \$ \_\_\_\_\_

Rock Church Academy Financing Plan Administrative Fee \$ **30.00**  
 3% Credit/Debit Card Fee \$ \_\_\_\_\_  
 Total Tuition & Fees \$ \_\_\_\_\_

Payment Frequency:  Quarterly  Monthly

(1<sup>st</sup> Payment Due July 15<sup>th</sup>. If enrolling after this date first two payments are due at enrollment)

### Quarterly Payment Schedule

Qtr 1 (Due July 15 <sup>th</sup> )	Qtr 2 (Due September 15 <sup>th</sup> )	Qtr 3 (Due December 15 <sup>th</sup> )	Qtr 4 (Due March 15 <sup>th</sup> )
\$ _____	\$ _____	\$ _____	\$ _____

### Monthly Payment Schedule:

July 15<sup>th</sup>  August 15<sup>th</sup>  September 15<sup>th</sup>  October 15<sup>th</sup>  November 15<sup>th</sup>  
 December 15<sup>th</sup>  January 15<sup>th</sup>  February 15<sup>th</sup>  March 15<sup>th</sup>  April 15<sup>th</sup>

Total Tuition & Fees: \$ \_\_\_\_\_ / # of Payments \_\_\_\_\_ = Payment of: \$ \_\_\_\_\_

I understand that Rock Church Academy (RCA) does not offer refunds for any reason. Families may not stop automatic payments. Payment dates are final and cannot be changed for any reason. Parents who enroll in RCAFP after July 15<sup>th</sup> will be subject to additional tuition payments. Please ensure that you have sufficient funds in your account to cover each scheduled payment. Payments may take several business days to come out of your account. Declined Rock Church Academy Financing Plan (RCAFP) payments will result in a non-sufficient funds charges of \$35.00 per occurrence. I understand that any unpaid balances will result in my child's dismissal from school and may be shared with creditors to collect payment on behalf of RCA. Full payment of the outstanding current tuition owed plus any applicable fees will be required for consideration of student reinstatement and to issue any student records.

Parent's Signature: \_\_\_\_\_ Date of Registration: \_\_\_\_\_

OFFICE USE ONLY: Registration Verified by: \_\_\_\_\_ Date: \_\_\_\_\_

Payment Processed By: \_\_\_\_\_

Revised: 02/2021