South Choctaw Academy

Student Enrollment

2025 - 2026

**Father’s Name** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Mother’s Name** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Address** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Zip** \_\_\_\_\_\_\_\_\_\_\_\_\_

**Email address** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Enrollment Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Phone**: **Cell**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Cell** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Home \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 (Father) (Mother)

**List names/numbers of three persons other than parents to contact in case of illness/emergency.**

Name Phone Number Work Number

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Student*** *that my child may be dismissed with in case of emergency* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please enter information below concerning each child entering school**.

**Name Gender Date of Birth SS# Grade**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_

\_\_\_\_\_**Yes** \_\_\_\_\_ **No**

***Has your child received special services or does your child have a medical diagnosis?***

**If yes, please explain**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Medications/Allergies/Special Instructions**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Clinic/Hospital/Doctor of Choice:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*In case of emergency your child will be transported to the nearest facility.*

Primary Insurance \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Policy Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, as parent or legal guardian of student(s) listed, a minor, authorize a South Choctaw representative to obtain the necessary medical treatment for any physical illness and/or injury while participating in school activity.

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, a parent or legal guardian of student(s) listed, a minor, authorize a South Choctaw representative to administer OTC medication, as needed.

**Do you intend to use *CHOOSE ACT* funds for this year’s tuition: YES or NO\_**

## SOUTH CHOCTAW ACADEMY

# ENROLLMENT CONTRACT

**THIS AGREEMENT** constitutes a contract between South Choctaw Academy, Inc., an Alabama Corporation, and the parents or guardians whose signatures appear hereinafter. As used in this agreement: “I”, “You,” “Your” or “Yours” refer to the person who signs the Enrollment Contract; “WE,” “Us” or “Our” refer to South Choctaw Academy.

1. **STUDENT PLACEMENT**

By signing this Agreement, you are requesting for the students listed below, in the grade listed below, for the school year beginning August, 2025.

**Student \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade \_\_\_\_\_\_\_\_**

**Student \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade \_\_\_\_\_\_\_\_**

**Student \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade \_\_\_\_\_\_\_\_**

**Student \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade \_\_\_\_\_\_\_\_**

1. **FEES AND PAYMENTS**

See the attached enrollment forms, the tuition payment plans, and the tuition fee form all of which are required to be completed at the time of registration.

**A.** Registration fees are due on or before the first day of school. All registration fees are non-refundable.

**B.** Tuition is due on the 1st day of each month.

**C.** Transcripts will not be forwarded to other schools following withdrawal or transfer until **all** accounts are paid in full.

**D.** All prices are subject to change without advance notice.

**E.** There will be a $25.00 returned check fee. After two returned checks, payments must be made in cash, credit card or by money order.

**F.** Graduating seniors must have all fees and tuition paid by the 1st of May.

**G.** Credit Card payments are available, with a 3% fee per transaction.

**H.** All fees, including but not limited to, tuition, library, lunch, and/or any other fees **MUST** be paid in full before registering for the next school year.

**I.** If paying with “**CHOOSE ACT**” funds, tuition and applicable fees MUST be paid in full when awarded.

**III.** **LIQUIDATED DAMAGES in the event of BREECH OF CONTRACT**

I understand that by signing this document, I am entering into a contract with South Choctaw Academy, Inc. This contract requires South Choctaw Academy, Inc. to provide services as stated herein and requires me to pay for those services as stated herein. I understand that South Choctaw Academy, Inc. is relying upon my performing all financial obligations contained in this contract when decisions are made concerning the number of employees to hire for the school year, in determining the amount of materials, supplies, books etc. that will be needed for the school year and in making various other decisions requiring a financial obligation by South Choctaw Academy, Inc.

**\_\_\_\_\_\_\_ I have read and understood the terms and conditions of the above stated paragraph and I understand my rights and obligations as stated therein.**

I understand that in the event I breach this contract or I default on any of the obligations imposed upon me as a result of my signing this contract, South Choctaw Academy, Inc. is entitled to liquidate damages as a result of its reliance upon my promise to meet the financial obligations contained herein. I understand that if my child/children actually begin classes for the school year covered by this contract, I will be required to pay all monies owed to South Choctaw Academy as stated in this contract. The fact my child/children do not attend for the entire year will not decrease the amount owed.

**\_\_\_\_\_\_\_ I have read and understood the terms and conditions of the above stated paragraph and I understand my rights and obligations as stated therein.**

I understand that if I breach this contract at any time after I enter into this contract, I will be responsible for the payment of all costs South Choctaw Academy, Inc. may incur in the enforcement of this contract, including but not limited to attorney fees, filing fees, etc.

**\_\_\_\_\_\_\_ I have read and understood the terms and conditions of the above stated paragraph and I understand my rights and obligations as stated therein.**

I understand that liquidated damages as assessed in this provision is not a penalty, but is intended to compensate South Choctaw Academy, Inc. for the costs incurred by South Choctaw Academy, Inc. as a result of my decision to enter this contract and their requirement to be prepared to provide services to my child/children.

**\_\_\_\_\_\_\_ I have read and understood the terms and conditions of the above stated paragraph and I understand my rights and obligations as stated therein.**

**I understand that if I breach this contract at any time after I enter into this contract, I will not only be responsible for the payment of all costs South Choctaw Academy, Inc. may incur in the enforcement of this contract, including but not limited to attorney fees, filing fees, etc. I will also be responsible for the payment of “Early Termination Fee” which will be assessed in the following manner:**

* **$1,500.00 “Early Termination Fee” if there is a breach of contract during the 1st semester of school.**
* **$1,000.00 “Early Termination Fee” if there is a breach of contract during the 2nd semester of school.**

 **\_\_\_\_\_\_ I have read and understand the terms and conditions of the above**

**stated paragraph and I understand my rights and obligations as**

**stated therein.**

 **\_\_\_\_\_\_ I hereby acknowledge that I have read the above paragraph and understand that I will be fully responsible for payment of all monies owed as a result of this contract, regardless of whether my child/children actually attend(s) South Choctaw Academy for the school year that is the subject of this contract.**

1. **RULES AND REGULATIONS**

You agree to abide by all of South Choctaw Academy’s rules and regulations and ensure your child/children enrolled also abide by said and understand that the school may dismiss students who do not obey said rules and regulations. We reserve the right to discipline or dismiss any student whose conduct, or whose parents’ orsponsor’s conduct, is determined in the sole discretion of the Head to be disruptive or detrimental to the learning process and environment at SCA. You agree that the named student in Section I may take part in all school activities, including sports, and may take part in any school sponsored trips including bus trips and any trip away from the school premises. **You must give written notice if you want to restrict such activities or disciplinary actions.**

1. **Publicity Release Policy:** You hereby consent and authorize South Choctaw Academy, to reproduce from any performance, your child’s picture and/or voice for all or any news and/or advertising purposes of every kind and nature, and hereby release South Choctaw Academy from all claims on said performance or any reproduction thereof. No compensation for said performance or performances will be given.
2. **Internet Use Policy:** Electronic information resources are available to students enrolled at South Choctaw Academy. Students are to use the Internet and other electronics information resources in an appropriate manner, abiding by the rules and regulations as described in this agreement. The use of information resources is a privilege, not a right. Inappropriate use of these resources may result in disciplinary action (including the possibility of suspension or expulsion), and/or referral to legal authorities. The headmaster or teacher may limit, suspend or revoke access to electronic resources at any time.

**\_\_\_\_\_\_ As the parent or guardian of the above named student, I have read the above paragraph and understand that Internet sites are filtered and may be monitored. I understand my child may be disciplined for inappropriate or unacceptable use of electronic information resources. I further understand that student use of the electronic information resource system is designed for educational purposes. I understand it is impossible for South Choctaw Academy to filter or restrict access to all inappropriate materials. I will not hold the South Choctaw Academy responsible for inappropriate or unacceptable materials my child may acquire on the network system. I hereby give my child/children permission to use the internet.**

1. **Social Media Policy**

In the rapidly expanding world of electronic communication, the use of social media can be a rewarding way to communicate with family, friends, and coworkers. However the use of social media also represents certain risks and carries with it certain responsibilities. In order for South Choctaw Academy to maintain both a safe and Christian environment, we have established these guidelines for appropriate use of social media.

**Students** who engage in any form of social media in an inappropriate way towards a fellow student, teacher, or staff member of South Choctaw Academy will be managed in the following manner:

* **1st Offense** = 1 Day Suspension
* **2nd Offense** = 3 Day Suspension
* **3rd Offense** = Expulsion From South Choctaw Academy

**Parents or Guardians** of students at South Choctaw Academy, who engage in any form of social media in an inappropriate way or make derogatory or inflammatory comments towards a student, teacher, or staff member of South Choctaw Academy or about the institution of South Choctaw Academy itself, will be managed in the following manner:

* **1st Offense** = $250 fine – Report Cards & Transcripts held; Blocked from Power School until paid
* **2nd Offense** = $500 fine – Report Cards & Transcripts held; Banned from extracurricular activities (Athletic Events, Assemblies, Prom, Graduation, etc.) until paid
* **3rd Offense** = Expulsion of Student(s) from South Choctaw Academy

All issues will be managed at the discretion of the Headmaster and/or the Board of Directors. Our desire at South Choctaw Academy is to maintain the most positive environment possible for our students during their time at S.C.A. Thank you in advance for your help and support in this matter.

**By signing below, you are testifying to the fact that you have read, understand, and support South Choctaw Academy’s policy on Social Media for the upcoming school year:**

Parent Signature: \_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_ \_\_\_\_\_\_

Student Signature; \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**VIII.** EXECUTION OF THIS CONTRACT MEANS THAT YOU HAVE CAREFULLY READ THE TERMS OF THIS AGREEMENT AND ASSUME ALL FINANCIAL RESPONSIBILITY.

**I HAVE CAREFULLY READ THE TERMS OF THIS AGREEMENT.**

**Do Not Sign unless you are in the presence of a Notary.**

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SIGNATURE OF PARENT OR GUARDIAN**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PRINTED NAME OF PARENT/GUARDIAN**

**Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

South Choctaw Academy does not discriminate on the basis of race, color, national or ethnic origin in administration of its educational policies, admission policy and athletic and other school-administered programs.

**PLEASE DO NOT SIGN BELOW THIS LINE**

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STATE OF ALABAMA

COUNTY OF CHOCTAW

I, **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**, the undersigned authority, a Notary Public in and for said County in said State, hereby certify that **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**, whose name is signed to the foregoing contract and who is known to me, acknowledged before me on this day, that being informed of the contents of said contract he/she has executed the same voluntarily on the day the same bears date.

Given under my hand and seal this the \_\_\_\_\_\_day of\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 2025/26

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ NOTARY My Commission Expires:

 Notary

My commission expires:

 September 18, 2026

South Choctaw Academy

Tuition and Fees, 2025 – 2026

**REGISTRATION, per family**:

Fees must be paid in full by AUGUST 1.

Entrance Fee……. $100.00

BLD/Main………..$200.00

Custodian………...$100.00

 **$400.00**

After $400 Registration is paid, the remainder will be paid as follows:

|  |  |  |  |
| --- | --- | --- | --- |
| **Number of Students** | Total **ANNUAL AMOUNT** Due  | Total Due **AFTER $400** **REGISTRAION** is paid | **Monthly** **Payment x 11****(September-July)** |
| 1 | $5,075.00 | $4,675.00 | $425 |
| 2 | $6,725.00 | $6,325.00 | $575 |
| 3 | $8,100.00 | $7,700.00 | $700 |
| 4 | $8,925.00 | $8,525.00 | $775 |

Below is an explanation of the amounts listed above.

**Balance of Registration to be added to Tuition:** **Tuition:**

Enrollment Fee **(per family**)………….……………..**$155.00** One Child…………..$3,830

Drug------------------------------- $ 25.00 Two Children...….…$5,165

Annual --------------------------- $ 75.00 Three Children…..…$6,225

Athletic--------------------------- $ 75.00 Four Children.….….$6,735

ACADEMIC FEES (**per student**)……………………**$315.00**

AISA --------------------------- $ 45.00

Book Fees --------------------- $150.00

Library ------------------------- $ 15.00

Science ------------------------- $ 10.00

Classroom --------------------- $ 15.00

Testing ------------------------- $ 20.00

Computer Fee ----------------- $ 40.00

**FUNDRAISING FEES, per family ($375):**

We will **not** be having school-wide fundraising this year. All fundraising fees will be added to the total annual amount. These fees may be included in monthly payments or paid in full at one time.

**BUS FEES, per family ($100/month)**:

Bus fees are payable September through May.

**TUITION LATE FEE**: **$25.00**

Post-Dated Checks should be dated before/on the 10th of each month.

Dates **will not** be changed on checks.