Saint Anthony Academy 10201Main Street Suite 125 Fairfax, VA 22030 (703) 330-2121

## **CONTRACT 2017-18**

(due 6/30/2017)

| I wish to enroll  |  | in the  | grade   |
|---|--|---|---|
|   |  |   | grade   |
|   |  | in the  | grade   |
|   |  |   | grade   |
|   |  |   | grade   |
|   |  |   | grade   |
|   |  | ın the<br>in the  | grade<br>grade  |
| myself fully responsible, whether uphold, support, and implement  | r directly as regards my pet<br>the school policies relating   | •   | y parental duty to  |
| child/children, including: registra<br>as well as all other records con<br>documents need to be turned in | tion form, birth certificate,<br>cerning the medical, acac<br>before the beginning of t                              | cessary documents and forms for the baptismal certificate, transcripts from demic and disciplinary background of the school year. (The parent of a stude eed only provide a pre-registration or | previous schools,<br>each child. These<br>ent who has been    |
| method of payment. I understand<br>my obligation to pay the full tuit<br>payment in order to provide the  | d that SAA will allow me to<br>tion. I further understand<br>he resources required for<br>ees (pursuant to the provi | pay the tuition over ten months but this that SAA is relying (to its detriment) of the operation of the school. I also sions set forth below), and any other s, and similar expenses.           | s is no way affects<br>on this promise of<br>agree to pay the |
| Athanasius Church in uniform al   | l First Friday Masses duri   | I functions. It is mandatory that all studing the school year as well as the follonception, and the Feast of the Ascensic   | wing holy days of   |
| 4. I accept the Academy Discip  | pline and Honor Code and   | the application thereof. *  |   |
| 5. I accept the Uniform Code Code. *  | and all rules, precepts ar   | nd policies emanating from the Acader   | my regarding said   |
| I have read the a   | bove contract, and agree   | e to follow the terms contained there   | in:   |
| Mother's Name   | email  | Father's Name   | email   |
| Signature   | <br>Date   | Signature   | <br>Date  |

<sup>\*</sup> See Academy website for this code – www.stanthonyacademy.org

## **TUITION PAYMENT PLAN**

| 1. I agree to pa                            | ay the full tuition alor                  | ng with all fees by August 15, 2017.   |  |
|---|---|--|--|
|   |   | OR   |  |
|   |   | er the semester plan, with half of the nd the other half due by February 1,  |  |
|   |   | OR   |  |
| I will pay the be paid by A                 | tuition in ten equal pugust 15, 2017. The | es via an automatic payment plan lin<br>payments. The first payment (to als<br>e nine subsequent payments will be<br>the payment plan will be mailed upo | o include all fees) will paid in the months of October |
| MUST BE ARRANGED IN AD                      | OVANCE WITH THE ESE ARRANGEME             | GARDING THE PAYMENT OF TUI<br>PRINCIPAL WHO WILL ENTER T<br>NTS ARE TO BE ARRIVED AT BY  | HE SPECIFIC PROVISIONS                                 |
| Arrangements and condition                  | on:                                       |  |  |
|   |   |  |  |
| I agree to the above plan                   | of payment to St. A                       | Anthony Academy for the 2016-20  | 117 academic year:                                     |
| Mother's first and last name (please print) |   | email address  |  |
| Father's first and last name (please print) |   | email address  |  |
| Signature of Mother                         | Date                                      | Signature of Father  | <br>Date   |
|   | ACCEPT                                    | TANCE BY PRINCIPAL:  |  |
| Signature of Principal                      |   |  |  |