

| Student Name | ID# | Date |
|---|--|---|
| Financial Agreement Details: Andrews Academy tuition charges equal billings of \$1,035.00 due by the first day of classes on or befor To enroll in Andrews Academy, ea Payment Plan. A "Payment Plan" is a contractual | s for the 2024-2025 school year is \$10,35 the 25 th day of each month. The first mo re Monday, August 5, 2024. Inch student must either (a) pay her/his pr agreement entered into by the student's or full payment or (b) provide for paymen | 0.00. Tuition will be charged in ten nth's tuition is due 2 weeks prior to rior account in full or (b) enter into a sparent(s) and Andrews Academy. A |
| To continue enrollment in Andrey obligations met. If a student accobecomes more than 60 days past exceptions to this policy must be a Student accounts/payment plans past due, any payments submitted Seniors will not be permitted to page 2. | ws Academy, all student accounts must e unt becomes more than 60 days past due, due, the student will be asked to withdra approved by the AA Board Finance. must be current to participate in tours. V d towards a tour will be re-directed to the articipate in graduation weekend ceremos s policy must be approved by the AA Boa | e, or if a Payment Plan obligation aw from Andrews Academy. Any Where accounts are 60 or more days e student's account. Onies unless their account has been |
| I understand one of the following must be | paid on or before Monday, August 5, 20 | 24: |
| ☐ Full tuition payment of \$10,350 | .00. | |
| ☐ First month's tuition payment o | f \$1,035.00. | |
| ☐ Approved payment plan, first m (Applies to monthly payments of \$1,035.0 | nonth's tuition payment of \$ | d, etc.) |
| My signature below indicates I agree with may apply as per attached schedule. I und paid in full. I assume financial responsibili pay all charges incurred by the student at to pay reasonable costs of collection and a on unpaid balances for the month. | lerstand that transcripts or diplomas will ity as outlined in the Andrews Academy 2 AA in the month that they are billed. We | not be released until this account is 2024-2025 <i>Sourcebook</i> and agree to further agree if non-payment occurs, |
| Parent/Guardian's Signature | Spouse's Signature | |
| Print Name and Date | Print Name and Dat | e |
| | Office Use Only | |
| Authorized Signature | Title | Date |