

# Sacred Heart Academy

265 Benham Street  
Hamden, CT 06514-2833  
(203) 288-2309 fax (203) 230-9680

## STUDENT ENROLLMENT CONTRACT: 2010-2011 Academic Year

Name of Student: \_\_\_\_\_ To enter grade: \_\_\_\_\_

In consideration of the acceptance of this Contract by Sacred Heart Academy (the "School"), the undersigned agrees to pay the required tuition in full on or before July 1, 2010 in order to assure the above named student a place at the School for the 2010-2011 academic year. A non-refundable reservation deposit of \$500 or payment of the full tuition must accompany the submission of this completed and signed contract on or before **March 1, 2010**. The deposit will be applied toward the 2010-2011 academic year's tuition.

The tuition for the 2010-2011 academic year is \$10,600. I understand and agree that if the required tuition is not paid in full by July 1, 2010, by the option chosen below, the above named student will forfeit her place at the School for the 2010-2011 academic year.

I understand and agree that my obligation to pay the tuition for the full academic year by July 1, 2010 is unconditional and that after July 1, 2010 no portion of such tuition paid will be refunded or cancelled in the event of absence, withdrawal or dismissal of the above student from the School.

I further understand and agree that in signing this Enrollment Contract, I am agreeing to accept the rules and regulations of the School as stated in the Student Handbook. Furthermore, it is agreed that enrollment, as specified within the Enrollment Contract, may be cancelled by the parent or guardian financially responsible for the above named student in writing, without penalty, (except forfeit of the reservation deposit) prior to July 1, 2010. A recurring monthly late fee of \$50 will be imposed for any late payments and outstanding balances. A fee of \$50 will be imposed for any payment returned for insufficient funds.

This instrument shall be interpreted in accordance with the laws of the State of Connecticut.

### PAYMENT AMOUNT (Please check one):

TUITION & FULL GAP DONATION

Tuition \$10,600  
Tuition Gap (tax deductible) \$1,400  
Total **\$12,000**

TUITION & PARTIAL GAP DONATION

Tuition \$ 10,600  
Tuition Gap (tax deductible) \$ \_\_\_\_\_ (indicate amount)  
Total \$ \_\_\_\_\_ (please total)

### PAYMENT OPTIONS (Please check one):

- OPTION 1:** \$500 Deposit enclosed. 100% of balance due by **June 1, 2010**.
- OPTION 2:** \$500 Deposit enclosed. 50% of balance paid by **June 1, 2010** and 50% paid by **July 1, 2010**.
- OPTION 3:** \$500 Deposit enclosed. 100% of balance paid via bank financing from June 2010 to March 2011. A Loan Application must be received by NewAlliance Bank by **March 1, 2010**.
- OPTION 4:** \$500 Deposit enclosed. Partial payment (\$ \_\_\_\_\_) due by **June 1, 2010** and partial bank financing (\$ \_\_\_\_\_) from June 2010 to March 2011. A Loan Application is due to NewAlliance by **March 1, 2010**.

*This section to be completed by the parents/guardians financially responsible for student:*

PRINTED full name of parents/guardians: \_\_\_\_\_

Mailing Addresses: \_\_\_\_\_

Phone Numbers: \_\_\_\_\_

Email Addresses: \_\_\_\_\_

SIGNATURE (of parent/guardian #1): \_\_\_\_\_ Date: \_\_\_\_\_

SIGNATURE (of parent/guardian #2): \_\_\_\_\_ Date: \_\_\_\_\_

White: Business Office Yellow: Registrar Pink: Parents

Please return this completed form (*retaining your pink copy*) to the SHA Business Office by no later than **March 1, 2010**