

TUITION PAYMENT PREFERENCE FORM

School Name: Clinton Christian School

Responsible Party: _____

Address: _____ City: _____ State: _____

Student(s) Name: _____ Year of Graduation: _____

For the 2007-2008 school year, I will pay my student's tuition by the payment option checked below. If not previously enrolled with FACTS, I will complete a FACTS Tuition Agreement Form.

- OPTION 1 Full Tuition Payment** due 07/01/07. Please see K4 – 12th Tuition & Fees Schedules found on page 8 of the Financial Handbook for discounts.
- OPTION 2 Monthly Payments through FACTS.**

COMPLETE ONLY IF RE-ENROLLING IN FACTS

Peace of Mind Tuition Protection Plan

FACTS offers an optional Peace of Mind Tuition Protection Plan. For a non-refundable annual fee of \$12 per FACTS Agreement, FACTS will pay the remaining unpaid balance on your FACTS Agreement (except payments in arrears) to Clinton Christian School, in the event of the death of the responsible party or his/her legal spouse. Coverage begins when the fee for Peace of Mind has been paid to FACTS.

Please indicate below whether or not you wish to enroll in the Peace of Mind Plan. Your Peace of Mind election for the previous school year will remain the same for the current school year, unless you check a box below.

- Yes, please enroll me in the POM plan. I agree to pay a non-refundable annual fee of \$12 per FACTS Agreement.
If you are enrolling in POM, you must complete the following information concerning the person responsible for payment.

Marital Status: Married Single

Date of Birth: € -

- No, please do not enroll me in POM.

If you are re-enrolling in FACTS, you do not have to complete a new FACTS Agreement; unless you enrolled in FACTS after January 1, 2007, or you are changing the responsible party on your FACTS agreement. For ex: If the FACTS was in Dad's name last year and now it will be in Mom's, you will need a new FACTS agreement.

Complete this paragraph, only if your bank account information has changed from last year's FACTS Agreement:

- 1) For a checking account, attach a voided check (no deposit slips) **OR**
2) For a savings account, provide the bank name _____, routing number _____, and savings account number _____.

Fee's charged by FACTS:

- 1) An annual fee of \$41 will be assessed to your account for using FACTS Tuition Management Company for the 2007/2008 school year.
2) Missed payment attempts will be charged a \$25 fee by FACTS.

ALL CHANGES MUST BE GIVEN TO THE FINANCE OFFICE 10 DAYS PRIOR TO YOUR WITHDRAWAL DATE.

My signature below signifies that I have read the school policy regarding tuition and agree to abide by all the terms of this policy, and I agree to make tuition payments for the 2007/2008 school year according to one of the options above, as indicated by my selection.

Responsible Party's Signature _____

Date _____

This form must be returned to the school immediately upon completion
This form is for use in collecting information to complete agreements/re-enrollments.