



Lycée Franco-Américain International School
Cooper City, Florida, USA

PAYMENT PLAN AGREEMENT

PLEASE SUBMIT A PAYMENT PLAN AGREEMENT EACH SCHOOL YEAR

Student's name _____

Grade _____

I have chosen the following payment plan:

There will be a \$75 late fee for all payments made after the 5th of the month and 15% of the balance for all payments made after the 15th of the month.

PAYMENT PLANS WILL BE ESTABLISHED FOR ALL CURRENT YEAR CHARGES. PAYMENT PLAN ARRANGEMENTS SHOULD NOT BE MADE UNTIL REGISTRATION IS FULLY COMPLETE. Any charges incurred after this plan is established including charges for additional activities or services added must be paid separately by the published due date or the date of registration if they occur after the tuition deadline.

NO AMENDMENTS TO THE PLAN WILL BE ACCEPTED.

- I commit to pay Lycée Franco-Américain International School all payments detailed in this payment agreement by the established deadline.
- I understand that the payment agreement can be established for only one year.
- No school services (i.e., transcripts) will be granted if the payment is not received on time.
- No financial aid is applied until all aid has been finalized and all requirements have been met.
- I understand and agree that failure to pay all charges by the due date will leave my account subject to financial penalties, including collection and legal fees.
- I understand and agree that any payments made to the School will be credited first to any delinquent charges.
- I understand and agree that withdrawal from the School does not release me from this payment plan obligation, any financial penalties or other collection costs.
- At **30 days past due**, the entire payment plan balance will be accelerated (to a shorter term) and a late penalty of 15% of the outstanding balance will be assessed. The late penalty indicates that your account is past due. Unless you resolve the debt immediately, the School will advance the matter to the next step in the collection process, and your child may not be allowed to register for next year.
- Once an account is **60 days past due**, repayment arrangements may be made directly with the collection agency, and the account holder bears the costs associated with collection efforts. The cost associated with collection efforts is approximately 33.33% of the outstanding balance, which can add substantial additional charges. We encourage you to make payment in a timely manner and avoid financial penalties.
- The makers and endorsers of this agreement hereby waive protest, presentation, and notice of dishonor and hereby agree to remain bound for the payment of this agreement. The makers and endorsers of this agreement agree to pay all expenses incurred in the collection of this agreement.

*** Please note: This is a binding contract.**

Printed Name of Parent/Guardian

Signature of Parent/Guardian (required)

Date

ADDITION TO ENROLLMENT CONTRACT

Parents or guardians should sign this Contract in duplicate and return both copies to the Admissions Office. One copy will then be countersigned and returned by this office.

Lycée Franco Américain (LFA) agrees to enroll (student's name) for the 2019- 2020 school year, and to provide the program and educational and other services as prescribed for that grade. In consideration of the acceptance of the Enrollment Contract by LFA the undersigned agrees to pay the required fees as specified in the Enrollment Manual and Procedures:

This contract is an addition to the general contract of the registration, policies and procedures that the parent has signed for this school year 2019-2020.

I understand that my obligation to pay the fees for the full academic year is unconditional and that after August 1 no portion of fees paid or outstanding will be refunded or canceled in the event of absence, withdrawal or dismissal from the school of the above student.

In view of this obligation, I understand participation in the Tuition Refund Plan is required unless I present satisfactory evidence of tuition and related fees are paid in full for the school year.

I understand that the cost of this insurance protection together with a leaflet describing the details will be provided to me with the first billing. The Plan will insure fees (prepaid and due) in the event of absence or separation according to the terms of the Policy. Additionally, I authorize the School to collect any claim payment to which I am entitled under the Tuition Refund Plan and credit it to my account, paying any excess to me. I agree to pay the School whatever balance remains unpaid after any payment by the Plan is credited to my account within 30 days after receipt of a final, itemized bill.

I understand that in signing this Enrollment Contract for the coming academic year, I am agreeing to accept the rules and regulations of the School as stated in the current catalog and the rule concerning payment of fees as referred to above. Furthermore, I agree to the policy of the School that no student will be permitted to take examinations nor will grades and transcripts be released unless an account has been paid in full.

Enrollment, as specified within this Enrollment Contract, may be canceled by the parents or guardian in writing, without penalty (except forfeit of the Tuition fees) prior to August 1. If enrollment is canceled after August 1st, parents or guardian financially responsible for the student are obligated to pay the full annual charges. The undersigned agrees to release and hold harmless the school, its agents and employees from all claims, damages or other liabilities for injuries to my child which are not the result of gross negligence by this school, its agents or employees. The undersigned also agrees to indemnify the school for damages by my child. In order to reserve a place for your child, both copies of this Enrollment Contract and your Reservation.

Deposit must be received by the School no later than 1/05/2019. This contract shall be interpreted in accordance with the laws of the State of Florida.

My signature below affirms that I have read, understand and accept the terms and conditions of this contract.
Signature of Parents or Guardians Financially Responsible for Student:

Address _____

Accepted Date: _____ By: _____

Printed Name _____

Signature of Parent Responsible for Payments

TUITION PAYMENT PLAN PRESCHOOL 2019-2020

Tuition for:

Option C: Ten monthly payments of \$942.50 due on the 1st of each month from August – May.

THESE ARE YEARLY BINDING CONTRACTS.

Tuition is non-refundable and is due for the entire school year even if your child is officially withdrawn from the school before the end of the school year. Prepaid tuition will not be reimbursed.

All parents who do NOT pay the tuition in full by August 1st, 2019 will be required to pay for tuition insurance (Elementary \$250/year).

All tuition plans include a Non-refundable deposit of \$1,800 due by June 1st

Parental involvement requirement

Twenty (20) hours of parental involvement per year are required from each family and if all 20 hours have not been completed by May 15th, the school will charge \$10 per each hour not completed.

Meals

Payments are due on the first of each month.

After and Before School Care

Payments are due on the first of each month. (A daily rate is also available.)

☐ **FEES**

Lycée Franco-Américain International School will assess the following charges:

- ☐ Late Payment fee- \$75 for payments made after the 5th of each month, and 15% of the balance for payments made after the 15th of the month.
- ☐ Returned Check Fee-\$35.00, after two returned checks, we will only accept cash, cashier's check and money order.
- ☐ Late Pickup Fee is \$5 per minute after 6:05 p.m.

Registration fees (including Supply fee, Book fees, Admission test fees, etc.) are non-refundable.

- ✓ During registration, parents are required to provide the child's Florida Certification of Immunization form and the School Entry Health Exam form, signed and stamped by your child's doctor.
- ✓ D.C.F.S. requires that you receive the school's brochure, which includes the discipline policy. The signature below indicates that the parents/legal guardian(s) have been notified and agree with the discipline policy and the school rules and regulations.
- ✓ The administration reserves the right not to accept a student after the initial interview.

I certify that I have read and understand the above terms.

Date _____

Printed Name _____

Signature of Parent Responsible for Payment