Tamim Academy/HPS/Aleph Bet Tuition Contract Returning Family Enrollment Agreement

Name of the parent(s) or person(s) who will be financially responsible for this account: Address: City: State: Zip: Contact Phone: Work Phone: Cell Phone: Email Address: Name(s) of child(ren) being enrolled Age Grade (Next Aug.) All tuition payment plans: (select one) _____ Annually by Sept 1st Semi-annually: Sept 1st (50%) and January 1st (50%) ___ Monthly, beginning on Sept 1st - June 1, 2022, for ten months Please review the terms and conditions of the Tamim Academy/HPS/Aleph Be Enrollment Agreement below: 1. Term. I/we understand that upon submitting this signed agreement, I/we am/are agreeing to enroll my student(s) at Tamim Academy/HPS/Aleph Bet. 2. Eligibility. I/we understand that student(s) may not attend classes and/or participate in any school sponsored activities until the enrollment deposit(s) is/are paid, and all required enrollment documentation is properly completed and returned to the Tamim Academy/HPS/Aleph Bet business office. Initial Page 1 of 3

- 3. <u>Tuition and Programming Fees</u>. I/we acknowledge that by entering this agreement, Tuition and Fees are due and payable in full for the student(s) enrolled. Inasmuch as enrollment is made for the entire year and is budgeted accordingly, the obligation to pay Tuition and Fees for the entire academic year is unconditional; no portion of Tuition or Programming Fees paid or agreed to be paid, will be refunded or canceled, notwithstanding the subsequent absence, withdrawal, or dismissal from the school.
- 4. Withdrawal. I/we understand the following:
 - a) Official Withdrawal notice is required. Please submit in writing to the administration the withdrawal

notice with the last day of school.

- 6. <u>Delinquent Accounts</u>. I/we understand that report cards and transcripts will not be issued for any outstanding account. Tamim Academy/HPS/Aleph Bet reserves the right to deny continued enrollment or re-enrollment if I/we are not current with my/our financial obligations to the school for the current school year, unless prior arrangements have been made with the Business Office.
- 7. <u>Tuition Assistance</u>. I/we understand the following: Consideration for Tuition Assistance is initiated by request of the family and is awarded based on availability of funds and demonstrated financial need without regard to sex, race, color, religion, national, or ethnic origin.

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- 9. Parent/Student Handbook Agreement. I/we acknowledge that by entering this agreement, I/we and the student(s) agree to accept and abide by our school's philosophy, rules, and regulations, as described in the Parent Handbook. The school has the right to terminate the enrollment of any student for reasons set forth in the Parent Handbook, including the failure of parent to pay part or all of their financial obligations for the student's attendance.
- 10. Force Majeure. I/we understand the following: Tamim Academy/HPS/Aleph Bet's duties and obligations under this contract shall be suspended immediately without notice during all periods that the campus is closed because of force majeure events including, but not limited to, any fire, act of God, war, governmental action, act of terrorism, epidemic, pandemic or any other event beyond the Tamim Academy/HPS/Aleph Bet's control. If such an event occurs, Tamim Academy/HPS/Aleph Bet's duties and obligations in this contract will be postponed until such time as Tamim Academy/HPS/Aleph Bet, in its sole discretion, may safely reopen.
- 11. <u>Immunization</u>. I/we understand that the state of Texas and the regulations of Academy/HPS/Aleph Bet require students in all grades to have fully compliant immunization records on file **before attending** the first day of classes.

Authorization:

I/we wish to enroll my/our child/ren in Tamim Academy/HPS/Aleph Bet. I/we understand that my/our family is agreeing to abide by Tamim Academy/HPS/Aleph Bet rules, regulations and conditions contained in this contract and in the Tamim Academy/HPS/Aleph Bet Parent Handbook. I have read and agree to the terms of this contract. I/we accept financial responsibility according to the terms specified in this contract. I/we am/are responsible for full payment of all financial obligations set forth in this contract.

Signature of Parent(s)/Guardian(s) financially responsible for student:			
Signature:	Date:	Printed Name:	

Signature:	Date:	Printed Name:
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