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Shelby ID: \_\_\_\_\_

# International Registration/Tuition Contract 2012-2013

Calvary Murrieta Christian Schools  
24225 Monroe Ave  
Murrieta, CA 92562  
Phone: (951) 834-9190 Fax: (951) 834-9194

**Student Name:** \_\_\_\_\_  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_  
E-Mail: \_\_\_\_\_

Date \_\_\_\_\_

## Family Information (If same as above, write same)

**Parent's Name:** \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
E-Mail: \_\_\_\_\_

**Guardian's Name:** \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
E-Mail: \_\_\_\_\_

## Student Information

	Student Name	Date of Birth	Grade August 2012	Tuition
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
<b>Total Tuition for 2012/2013</b>				_____

## Payment Options

### Choose One

- Payment in full – Due August 10<sup>th</sup>
- Semi-Annual – Due August 10<sup>th</sup> and January 13<sup>th</sup> ÷ 2 = \_\_\_\_\_
- Registration Fee \_\_\_\_\_
- Technology Fee \_\_\_\_\_

### Choose One

- Cash or Check \_\_\_\_\_
- Credit Card – plus CV fee min 3.75% + \_\_\_\_\_

**Total Payment Obligation** \_\_\_\_\_

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Complete Application

Registration Fee

Date \_\_\_\_\_

## Credit Card Information

Name as it appears on card \_\_\_\_\_

Billing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_ Zip Code \_\_\_\_\_

Type of Card (circle one)      Visa      Discover      American Xpress      Master Card

Card Number \_\_\_\_\_ Expiration \_\_\_\_\_ 3 or 4 digit code number \_\_\_\_\_

Tuition Amount \$ \_\_\_\_\_ + X CV fee @ 3.75 = \$ \_\_\_\_\_ Total

## Banking and Credit Card Agreement

I have provided Calvary Murrieta Christian Schools with the above banking or credit card information. If I should choose to make any changes, I will notify Calvary Murrieta Christian Schools by providing a request in writing **two weeks prior** to change needed. **Any changes to banking or credit card information needs to be given to the CMCS Accounting Office 2 weeks prior to the Tuition due date.** If my bank or credit card company sends notice of insufficient funds, closed account or revoked, I am aware that there will be **\*\*Extra Fees\*\***. By signing this agreement, I guarantee that I am an authorized signer on the account provided. I hereby agree to be the Responsible Party. I hereby accept and agree to be bound by the terms and conditions contained within this agreement. If applicable, I authorize CMCS to initiate any **\*ancillary** debit or charge entries to the account provided, or any subsequent account.

Responsible Party Signature \_\_\_\_\_ Date \_\_\_\_\_

## Terms and Conditions

Tuition is an ANNUAL fee. The financial obligation to pay the fees for the full year is unconditional. **No portion of fees paid is refundable.** If you have chosen a payment plan, you are obligated to make full payment for the academic year under the terms of this contract regardless of absences, withdrawal, or dismissal from the school. I am aware that while signing this tuition contract, the total contract figure is not all inclusive. **Initial** \_\_\_\_\_

We encourage you to be a faithful steward of the responsibility that God has entrusted to you. Should you, during the term of our agreement, find it difficult to comply for any reason, please contact us as soon as possible so that we might discuss the problem openly and honestly. The previously mentioned fees are those which are standard and customary for all students. In an effort to offer a variety of extracurricular programs, it becomes necessary to charge additional fees accordingly. Please see the **Schedule of Fees** for a list of charges.

**Other Costs:** Parents should anticipate additional costs for books, special instructional supplies, locks, and expenses relating to outdoor education, sports, field trips, camp, class pictures, graduation and special events.

**Late Fees:** A \$25.00 fee will be assessed to your account on the 5<sup>th</sup> day after the scheduled payment was due to be paid.

**Insufficient Fund Fee:** A \$25.00 NSF fee will be charged to you for any check that is reported to have insufficient funds; stop payment; for a closed account.

**I have read, understand, and agree to the above statements.**

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Responsible Party Full Signature \_\_\_\_\_ Date \_\_\_\_\_

**This signature must be that of the person responsible for tuition payments.**

School Official Signature \_\_\_\_\_ Date \_\_\_\_\_

\* Ancillary Fees include but are not limited to: Class Fees

\*\*Extra Fees NSF =\$25; Late Fee=\$25; Changes=\$25

## Media Waiver and Release 2012/2013

I consent to my child being photographed, interviewed and/or videotaped by representatives of Calvary Murrieta Christian School (CMCS) and media outlets (newspaper, T.V., radio stations, etc.). Calvary Murrieta Christian School uses photos of children in congregational publications to share information about Calvary Murrieta. Any information or images obtained from those activities may be reproduced by Calvary Murrieta Christian School and/or the public media for use in advertising, publicity or educational activities, including but not limited to the Calvary Murrieta websites, advertisements, yearbooks, social medias, publications, videos, posters, banners, bulletin boards, print and television news. The full name of your child will not be disclosed in any materials without further approval.

**I hereby waive any claims I may have, and release CMCS and its representatives  
from liability of claims arising out of such activities.**

\_\_\_\_\_ Yes, my child may be photographed, interviewed or videotaped for media use.

\_\_\_\_\_ No, my child may not be photographed, interviewed or videotaped for media use.

### **Names and Ages of Children attending Calvary Murrieta Christian School**

Name	Grade	Age
<b>1.</b>		
<b>2.</b>		
<b>3.</b>		
<b>4.</b>		

### **Verification:**

I verify that the information provided on this form is accurate and current, and that I am the legal parent/guardian of the student.

X \_\_\_\_\_  
SIGNATURE of Parent/Guardian                      PRINT Name of Parent                      Date

X \_\_\_\_\_  
SIGNATURE of Student if student is 18 years old                      Date