



Application for Admission: 2021-2022

(Returning Student ____ New Student ____)

Applicant's Legal Name: _____ Grade: _____

Last First Middle

Primary Home Address:

Street City/State Zip

Goes by: _____ Date of Birth _____ Age: _____

Home Phone: _____ Gender: _____ Race: _____

Place of Birth: _____ Social Security Number: _____

Applicant's Current School: _____ Number of Years Attended: _____

School Address: _____

Street City/State Zip Phone Number

Father's Information:

Father's Full Name: _____

Address (if different from above): _____

Preferred Name: _____ Email Address: _____

Cell Phone: _____ Company Name: _____

Job Title: _____ Business Phone: _____ ext. _____

Spouse's Name: _____

Mother's Information:

Mother's Full Name: _____

Address (if different from above): _____

Preferred Name: _____ Email Address: _____

Cell Phone: _____ Company Name: _____

Job Title: _____ Business Phone: _____ ext. _____

Spouse's Name: _____

Office Use Only:

Date Application Received: _____ Received by: _____ Logged: _____ Transcript: _____

Application Fee Paid Date: _____ Check Number: _____ \$ _____ Tested: _____

Applicant lives with (check **all** that apply):

- Father Mother Stepmother Stepfather
- Other Name: _____ Relationship: _____
- Other Name: _____ Relationship: _____

Name and email address of individual with financial responsibility for applicant:

Does the applicant take any medication on a daily basis? _____

If yes, please identify and explain: _____

Does the applicant have any physical, emotional, or psychological weakness or learning disability? _____

If yes, please explain: _____

Has the applicant been dismissed from any school for any reason or received severe disciplinary censure?

If yes, give full details on a separate sheet of paper, including name of school and principal.

Provide any additional information you feel we should know: _____

List applicant's siblings and ages: _____

List any Thomas Hart alumni in your family:

Name:	Relationship to applicant:	Year of graduation or years attended THA:
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How did you become interested in THA? _____

If a specific family referred you to the school, please name the family. _____

I authorize this application for my child for admission as a student to Thomas Hart Academy for the 2021-2022 school year. I understand that admission is subject to the general statements, rules, regulations, conditions, and traditions of the school and the financial terms contained in the Enrollment Contract.

Signature of Parent/Legal Guardian

Date

Thomas Hart Academy welcomes students regardless of race, gender, ethnicity, nationality or religion.

Office Use Only: Date Received: _____ Application Fee: \$ _____ Check# _____

For returning students, a one-time, non-refundable application fee of \$50 per student must be paid at the time of enrollment. For new students, a one-time, non-refundable application fee of \$100 per student must be paid at the time of enrollment.

Thomas Hart Academy agrees to enroll the student(s) listed below for the 2021-2022 school year and to provide the educational program and other services as prescribed for that grade.

Student(s) Name:	Grade for 2021-22:	Date of Birth:
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

I understand that my obligation to pay the fees for the full academic year is unconditional and that after July 15, 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 student(s) listed above.

In view of this obligation, I understand that the Tuition Repayment Plan (TRP) is being made available to me at this time to protect my yearly financial obligation under the terms of the Enrollment Contract. This program insures fees (prepaid and due) in the event of separation according to the terms of the policy.

Tuition Repayment Plan

Note: TRP is required for Semi-Annual and Monthly Payments. TRP is only optional for Annual Payment participants.

(Please choose one AND initial.)

_____ A. I wish to participate in the TRP. The premium rate is 2.7% of the annual fees. I authorize the school to process and collect any claim payment to which I am entitled under the TRP and credit it to my account, paying any excess to me. I have received and read the enclosed brochure detailing the terms and conditions of coverage concerning this Plan.

_____ B. I do NOT wish to participate in the TRP. I understand that no refund or cancellation of the yearly fees will be made by the School for absence, withdrawal, or dismissal before the end of the school year and herein agree to assume full responsibility for the full annual fees. I have received and read the enclosed brochure detailing the terms and conditions of coverage concerning this Plan.

Financial Obligation Options (Please choose one.)

_____ Annual Payment: One payment is due on July 1. (TRP Optional)

_____ Semi-Annual Payments: Two payments due July 1 and January 1. (TRP Required)

_____ 11 Monthly Payments: Eleven payments due on the first day of each month July-May. (TRP Required)

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 handbook and the rule concerning payment of fees as referred to the above. Furthermore, I agree to the policy of the School that no student will be permitted to take examinations, nor will grades/ transcripts be released unless an account has been paid in full.

A late fee of \$20 will be assessed to any account unpaid by the 10th of any month. If the parent or guardian allows the account to lapse on the twentieth of the month, the student will not be allowed to attend school until the account is satisfied.

Thomas Hart Academy shall have the right to legal action for the collection of school fees and that parents will be responsible for all costs of collection, including but not limited to court expenses and reasonable attorney's fees.

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.

I authorize my child to participate in school trips under the supervision of the School faculty and staff. I agree to release and hold harmless Thomas Hart Academy, Inc., its agents, and/or employees from any and all liability whatsoever associated with the said School trips.

Should a medical emergency arise, I give my permission for the teachers to authorize treatment for my child should it be necessary, and I agree to assume all costs associated with this treatment and hold harmless the School for all outcomes and injuries resulting from such care.

Enrollment, as specified within this Enrollment Contract, may be canceled by the parents or guardians in writing, without penalty (except forfeiture of the Tuition Deposit) prior to July 15. If enrollment is canceled after July 15, parents or guardians financially responsible for the student are obligated to pay full annual charges.

In order to reserve a place for your child, this Enrollment Contract and your Tuition Deposit must be received by the School no later than the time of reenrollment for returning students or at time of acceptance for new students.

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 the student(s) listed above:		
Name _____	Address _____	Date _____
Name _____	Address _____	Date _____
Family Referral _____		
Primary email address for billing _____		
Accepted by Thomas Hart Academy Name _____ Date _____		

**Thomas Hart Academy
Schedule of Tuition and Fees
2021-2022**

<u>Grade</u>	<u>Tuition</u>	<u>Semi-Annual Payments*</u>	<u>11 Monthly Payments*</u>	<u>TRP</u>
K2-K3	\$5,400	\$2,835	\$540	\$146
K2 (half-day)	\$3,900	\$2,048	\$390	\$106
K4-K5	\$5,800	\$3045	\$580	\$157
1st	\$6,200	\$3,255	\$620	\$168
2nd-3rd	\$6,800	\$3,570	\$680	\$184
4th-8th	\$7,000	\$3,675	\$700	\$189

Returning Students:

Application: \$50 (due with application and contract, non-refundable)

New Students:

Application: \$100 (due with application and contract, non-refundable)

Technology fee: \$100 (will be invoiced on August 1 bill)

All Students:

Tuition Refund Plan 2.7% of tuition and fees required of semi-annual and monthly payment plans, optional for full payment plan
K2/K3 = \$146, K4/K5 = \$157, 1st = \$168, 2nd/3rd = \$184, 4th-8th = \$189
(one -time fee paid in July)

Penalty Charges Returned Check Fee: \$25
Late Fee: \$20 (assessed to any account unpaid as of the 10th of the month)

*Finance charges of 5% and 10% are added to semi-annual and monthly payment plans respectively.

The cost of lunch, class trips, yearbook, and the After School Program are not included in the tuition and will be assessed separately.

Miscellaneous Matters

Enrollment may be cancelled **in writing** without penalty (except forfeiture of the tuition deposit) prior to July 15.

Credit cards are accepted for the payment of tuition and fees with an additional 4% added.