OTTAWA CHRISTIAN Academy

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Email: ottawachristianacademy@yahoo.com
Principal • Debra Wenger
Superintendent • Jon Wenger

2023 - 2024 EDUCATIONAL INVESTMENT PAYMENT AGREEMENT FORM

Responsible Party _____ **Relationship to Student(s)** _____

Mailing Adress (for invoices/payment information) _____ **City** _____ **State** _____ **Zip** _____

_____-_____-_____ -_____-_____ -_____-_____

Primary/Daytime Phone **Cell Phone** **Other Phone**

Preferred E-Mail Address for financial communication (for invoices/payment information) _____

How did you hear about Ottawa Christian Academy? _____

Referral Family: _____

Office Use Only

Students Names (oldest to youngest)	Grade	Enrollment Fees	Tuition
1.		$	$
2.		$	$
3.		$	$
4.		$	$
5.		$	$
	Totals	$	$

PAYMENT SCHEDULE OPTIONS

One Box MUST Be Checked By Office Staff

- [ ] Full Tuition Payment (by August 1st 2023)
- [ ] Semi Annual Plan (Payment August 1st 2023 and Payment January 1st 2024)
- [ ] 10 Month Plan (August 2023 through May 2024)
- [ ] Graduation Fee: K5 $30.00; 8th & 12th; $40.00

For Office Use Only

Summary of Total Fees

Enrollment Fees $ _____
Tuition $ _____
Tuition $ _____
Graduation $ _____
Technical $ _____
Less:Payment $ _____
BALANCE DUE $ _____

We/I understand the enrollment fees are non-refundable. A $25.00 fee will be assessed for late payments after the 10th day of each given month. A $30.00 fee will be assessed for returned payments. We/I understand our/my child will not be permitted to continue attending school if our/my account becomes **40 days** or more past due. We/I understand that by signing below, we/I agree to maintain our financial commitment to OCA.

_____ ____ /____/____ _____ ____ /____/____

Responsible Party Signature Date Responsible Party Signature Date

Office Use Only:

Amount Paid $ _____ Cash [ ] Credit Card [ ] Check # _____ Online [ ] Date Received _____

Payment Plan Set Up _____ Changes Entered _____