

2024 - 2025 TUITION PAYMENT AGREEMENT FORM

Responsible Party _____ Relationship to Student(s) _____

Mailing Address (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 2024)
- Semi Annual Plan (Payment August 1st 2024 and Payment January 1st 2025)
- 10 Month Plan (August 2024 through May 2025)
- Graduation Fee: K5 \$30.00; 8th & 12th; \$40.00

Summary of Total Fees

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

For Office Use Only

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.

_____/_____/_____
_____/_____/_____

Office Use Only:

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

Payment Plan Set Up _____ Changes Entered _____