



HAMILTON DISTRICT CHRISTIAN HIGH TUITION PAYMENT SCHEDULE 2017-2018

Please complete this form, indicating your tuition amount, preferred method of payment and payment schedule. Please return to the school along with a pre-authorized payment form and voided cheque, or postdated cheques, no later than May 29, 2017.

PARENT / GUARDIAN#1 INFORMATION

FULL NAME: _____

ADDRESS: _____

PHONE: _____

EMAIL: _____

PARENT / GUARDIAN#2 INFORMATION

FULL NAME: _____

ADDRESS: _____

PHONE: _____

EMAIL: _____

STUDENTS' NAMES

STUDENT NAME

STUDENT NAME

STUDENT NAME

STUDENT NAME

TUITION QUADRANT

Please circle the tuition amount which applies to your family for 2017-2018, and then note the total in row "B" over the page.

| | ONE CHILD AT HDCH | 2+ CHILDREN AT HDCH |
|--|-------------------|---------------------|
| STUDENTS ENROLLED AT HDCH | \$15,100 | \$16,400 |
| STUDENTS ENROLLED AT HDCH AND A CHRISTIAN ELEMENTARY SCHOOL OR HOME SCHOOL. | \$11,900 | \$13,000 |

OPTIONAL BURSARY

This optional bursary amount is available for 2017-2018 to families with two or more children enrolled at HDCH. Please circle which amount, if either, applies to you. Then enter the amount in row B over the page.

If you are in a position where you do not need to take advantage of the bursary, please consider paying the full rate. As with the rest of your tuition payment, any amount above the annual cost per student will be eligible to be receipted as a donation in the new year.

| ONE CHILD AT HDCH | |
|---------------------------------------|--|
| \$650 STUDENTS ENROLLED AT HDCH | \$550 STUDENTS ENROLLED AT HDCH AND A CHRISTIAN ELEMENTARY SCHOOL OR HOME SCHOOL. |

TUITION CALCULATION

| | | | |
|---|--------------------|----|--|
| A | Tuition | \$ | Annual rate as per section A above. |
| B | Optional Bursary | \$ | Optional Bursary for families with two or more children enrolled at HDCH as per section B above. |
| C | Tuition Assistance | \$ | Additional support, if needed and as qualified for. |
| D | Credit | \$ | Existing tuition account credit as per enclosed account statement. (Families enrolling at HDCH for the first time were required to pay a non-refundable deposit, which is deducted from your total tuition.) |
| E | Total | \$ | Tuition remaining due for 2017-2018 (A – B – C – D = E) |

PAYMENT SCHEDULE

Please mark your preferred payment schedule and calculate the amounts of cheques or pre-authorized payments according to Total “E” above.

| | | |
|--------------------------|-----------------------------|---|
| <input type="checkbox"/> | PRE-AUTHORIZED PAYMENT PLAN | Complete the attached form and return, together with a voided cheque. |
| <input type="checkbox"/> | ANNUALLY | One payment for the full amount due September 1, 2017. Please attach a post-dated cheque. |
| <input type="checkbox"/> | QUARTERLY | Four equal payments dated September 1, 2017; November 1, 2017; February 1, 2018; April 1, 2018. Please attach post-dated cheques. |
| <input type="checkbox"/> | MONTHLY | Ten or Twelve equal payments dated the first of each month, starting September 1, 2017. Please attach post-dated cheques. |

SPECIAL NOTES:

- Families new to HDCH are required to pay a non-refundable \$500 deposit postdated for between **January 1, 2017 and March 1, 2017**. If applying after March 1, the deposit must be submitted along with application. This deposit goes towards your total tuition.
- Tuition fees cover school operating costs; they do not cover the costs of building expansions, capital improvements, or debt payments.
- Any personal information related to tuition is maintained for the purposes of Hamilton District Christian High only.
- Withdrawing your child from HDCH anytime during the school year does not relieve you of tuition still due. Tuition rebates are available on a limited basis as outlined in the Tuition Policy.

QUESTIONS:

If you have any questions related to tuition, method of payment or payment options, our Director of Finance, Sherry Osinga, would love to talk with you! Contact her at 905.648.6655 x111 or sosinga@hdch.org.

COMMITMENT

Your signature indicates your commitment to the Hamilton District Christian High Board of Directors to arrange payment for the above fees.

PARENT / GUARDIAN SIGNATURE

DATE



HAMILTON DISTRICT CHRISTIAN HIGH
PRE-AUTHORIZED PAYMENT FORM
 2017-2018 AUTHORIZATION FORM FOR TUITION

Please fill in the form below, and submit it along with a **void cheque**.
 This information is maintained for the purposes of HDCH only.

PERSONAL INFORMATION

NAME(S): _____
 ADDRESS: _____
 CITY / TOWN: _____ PROVINCE: _____ POSTAL CODE: _____

BANKING INFORMATION

NAME OF FINANCIAL INSTITUTION: _____
 BANK NUMBER: _____ TRANSIT NUMBER: _____
 ACCOUNT NUMBER: _____

PAYMENT SCHEDULE

I/we (the above named) authorize Hamilton District Christian High (HDCH) to debit my/our account indicated above, in the amount of \$ _____, starting September 2017, on the (check one)

| | | | | |
|--|--------------------------|----------|--------------------------|----------|
| 1 ST OF MONTH (MONTHLY) | <input type="checkbox"/> | 10 TIMES | <input type="checkbox"/> | 12 TIMES |
| 15 TH OF MONTH (MONTHLY) | <input type="checkbox"/> | 10 TIMES | <input type="checkbox"/> | 12 TIMES |
| 1 ST & 15 TH OF MONTH (SEMI-MONTHLY) | <input type="checkbox"/> | 20 TIMES | <input type="checkbox"/> | 24 TIMES |

AUTHORIZATION

Unless I/we notify HDCH in writing of a cancellation (2 weeks notice required). Each payment shall be the same as if I/we had personally issued a cheque authorizing the Bank to pay "Hamilton District Christian High" as indicated and to debit the amount specific to my/our account. I/we will notify HDCH in writing if I/we move the account from one bank or branch to another or if there is any change in the account.

I/we understand that the Bank is not responsible to verify whether these payments are properly debited to my/our account. This authorization may be cancelled with 2 weeks written notice by me/us to HDCH. Any delivery of this authorization to HDCH constitutes delivery by me/us to the Bank.

I am/We are the person(s) who are required to sign on the above account.

 PARENT / GUARDIAN #1 SIGNATURE DATE

 PARENT / GUARDIAN #2 SIGNATURE DATE