



THE PARISH SCHOOL

Optional Programs Enrollment Form 2019-20

Student's Name: _____

Please indicate below in which 2019-20 Optional Programs you would like to enroll your child. Complete and return this form with the required Payment Method Authorization Form to the business office. For more information on these programs, please visit www.parishschool.org/optional-programs.

Table with 3 columns: Program Name, Program Details, and Monthly Fee. Rows include Early Morning Drop-Off, Early Childhood Extended Day, and Elementary Extended Day with various options.

There are limited spots available in each of these programs, and spots will be filled on a first come, first served basis. You will be notified if space in the program is unavailable or if the program does not meet your child's needs.

Note that if your child is enrolled in an Optional Program after the beginning of the month or withdraws prior to the end of the month, the full month's payment is still due. Monthly fees are not prorated. Payment for all Optional Programs will occur on the 5th day of each month from August through May. If the child will no longer attend the following month's optional program, a notice in writing is required to be sent to the administrative manager (nmosley@parishschool.org) before the end of the current month. Note: To no longer attend the other optional programs listed below, contact the appropriate program director.

I/we, the undersigned parent(s)/guardian(s), request that my/our child be enrolled in the Optional Programs selected above.

Signature lines for Mother's/Legal Guardian 1's Name, Signature, and Date, and Father's/Legal Guardian 2's Name, Signature, and Date.

Other Optional Programs – The programs described below require additional consultation with a Parish representative. Please visit www.parishschool.org/optional-programs and contact each program director for more information.

- Adventure Play – 3 program options available (ages 6-12)
Social Learning – \$85 per hour (early childhood through high school students)
Tutoring – \$65 per session (elementary only)

The Parish School does not discriminate on the basis of or engage in harassment motivated by age, race, color, ancestry, national origin, sex, handicap or disability, marital status, religion, veteran status, political affiliation, sexual orientation, gender identity, and/or gender expression.

Child's Name: _____

Programs: _____



Payment Authorization Form

Attention:

Only complete this form if your payment method for optional programs is different from your current Smart Tuition account.

Please select one of the following:

1. Authorization Agreement for Direct Debits (ACH Debits)

I/we, _____, hereby authorize The Parish School to initiate debit entries to my/our **checking** or **savings** account (select one) indicated below at the depository financial institution named below, and to debit the same to such account. I/we acknowledge that the origination of ACH transactions to my/our account must comply with the provisions of U.S. Law Payment amounts and processing dates of Direct Debits are based on the payment option selected in the signed Enrollment Contract or Optional Program Enrollment Form for the 2019-20 school year.

Please complete this section and attach a voided check:

Depository Name _____ Branch _____

Routing Number _____ Account Number _____

2. Authorization Agreement for Credit Card Processing:

I/we, _____, hereby authorize The Parish School to process credit card transactions to my/our credit card noted below. Amounts and processing dates of credit card transactions are based on the payment option selected in the signed Enrollment Contract or Optional Program Enrollment Form for the 2019-20 school year. **We acknowledge that by selecting the pay via credit card, an additional 3.0% service fee will be applied to my account to cover credit card processing costs.**

Please complete this section:

Card Number _____ Exp. Date _____ CVV _____

THIS AUTHORIZATION IS TO REMAIN IN FULL FORCE AND EFFECT UNTIL THE PARISH SCHOOL HAS RECEIVED WRITTEN NOTIFICATION FROM ME/US OF ITS TERMINATION IN SUCH TIME AND IN SUCH MANNER AS TO AFFORD THE PARISH SCHOOL AND ANY DEPOSITORY FINANCIAL INSTITUTION INVOLVED A REASONABLE OPPORTUNITY TO ACT ON IT.

Account Holder Name _____ Date _____

Account Holder Signature _____