



**St. Joseph High School
Grade 10-12
Academy Fee – \$3,000
Contract - Sports Academy Program**

Student's Name: _____ Grade: _____

Terms of Agreement:

1. Acceptance into the Academy will not be confirmed until the deposit of **\$750** or full payment is remitted with my child's registration. **Deposit is NON REFUNDABLE after April 1. (Cash or Credit Card).**
2. **Please note: Deposits are required for Academy students by the dates as stated in the Academy contract. Academy placement will not be guaranteed without deposit payment accompanying this contract. Early withdrawal from the Academy will result in loss of the deposit which includes expenses incurred for clothing, booking of facilities, activities and transportation.**
3. I agree that it is my responsibility to ensure timely payments. If I default in meeting any of the payments, I understand that my child may be suspended from the program and equipment may be withheld. If any circumstances occur which may change my ability to meet the payment requirements, I agree to immediately contact the **Business Office at St. Joseph High School (403-341-4423)** to make alternate arrangements.

I have read the Terms of the Agreement. _____ Initials

Full Year Program	
Non Refundable Deposit \$750 - MUST accompany contract	
I Acknowledge deposit is NON REFUNDABLE after April 1 _____ Initials	
Installment - 1	Sep 1 - \$450
Installment - 2	Oct 1 - \$450
Installment - 3	Nov 1 - \$450
Installment - 4	Dec 1 - \$450
Installment - 5	Jan 1 - \$450

Payment Information (Please Print):

Parent's Name:		
Credit Card Number:	Expiry Date:	CCV:
Contact Phone Numbers: (Cell)	(Home)	
Email Address:		
By registering in the Academy I agree to receive electronic communications. _____ Initials		

***NOTE: Cash, Credit Card, Debit accepted for payment.**

Date

Signature of Parent/Guardian