ZION TEMPLE CHRISTIAN ACADEMY
3771 Reading Road
Cincinnati, Ohio 45229 (513) 861-5551

PROMISSORY AGREEMENT

In order to keep the school afloat, all bills must be promptly paid. Since our tuition is very reasonable, being on time with monthly fees are essential. The first tuition is due August 20th to SMART tuition before school begins. You may refer to cost sheet and financial policy for more information.

Do you have a scholarship? Yes___ No ___ Amt $_____. Do you qualify for a discount? Yes__ No __

After completing columns A, B, and C, please calculate row number 8 and place the total in column D8.

	Print Child (ren)'s Full Name (s)	Expected Grade Level(s)	(A Annual (10 Months) Tuition Amount Pre-school $3,500.00 K5 $3,000.00 Grades 1 thru 1st – 6th $2,850.00	(b BSW or ASW Ea. program $820.00 7am – 8am or 4pm – 6pm	(c BSA & ASW Two programs $1,440.00 7am – 8am or 4pm – 6pm	(D Total Cost of Tuition annually
1						
2						
3						
4	Subtotals					
5	Subtract Year's Discount if you qualify in column (A5		–	Bring B/ASW Totals Down To Row 8		
6	Difference					
7	Subtract Full Scholarship In column (A7		–			
8	Place The Difference In column (A8					

This will be your ten month total. Divide it by 10 to see your averaged monthly tuition payment.

To qualify for the family tuition discount you must have two children enrolled at ZTCA who are not in the pre-school department.

_____ _____ _____ _____
Street Address City State Zip

Day Ph. No. _____
Eve Ph. No. _____
Cell Ph. No. _____

I AGREE WITH HIGH PRIORITY TO MAKE REGULAR MONTHLY PAYMENTS OF $_____ TO SMART SERVICES ON BEHALF OF ZION TEMPLE CHRISTIAN ACADEMY FOR MY CHILD'S/CHILDREN'S TUITION/BEFORE AND OR AFTER SCHOOL WATCH FEE(S) BEGINNING AUGUST 20, 2008 THROUGH MAY 20, 2009.

CHECK OR MONEY ORDER ONLY – NO CASH

_____ _____
Signature **DATE**

_____ _____
Signature 2 **DATE**

_____ _____
Print Name **Print Name 2**

Thank you for choosing Zion Temple Christian Academy