

AMERICAN HERITAGE ACADEMY
ENROLLMENT APPLICATION FORM

Enrollment Checklist:

I have enclosed the following and returned them to American Heritage:

- **Payment for Registration (\$75.00 per student)**
- **First month tuition for each child enrolled**
- **All enrollment forms, pages 1 – 9**

AMERICAN HERITAGE ACADEMY

ENROLLMENT APPLICATION FORM

4325 Highway 17 South, Orange Park, FL 32003

Phone: (904) 269-2405 / Fax: (904) 264-9791 / Website: heritageministry.net

STUDENT INFORMATION

Student's Full Legal Name		E-mail	
Address		City/State	Zip
Age	Sex	S.S.#	Home Phone ()
Address (UPS Shipping Address if Mailing Address is a P.O. Box)		City/State	Zip
Birth Date	Birth Place	Last Grade Completed	Current Grade:
School attended last year (Name & Mailing Address)			
Have you attended A.H. A. previously?	How did you learn about and/or who recommended American Heritage Academy to you?		

PARENT OR GUARDIAN INFORMATION

Father's full name		E-mail		
S.S.#	Employer	Position		
Employer's Address				
Father's Home address (if other than above)				
Home Phone ()		Work Phone ()		
Mother's full name				
S.S.#	Employer	Position		
Employer's Address				
Mother's Home Address (if other than above)				
Home Phone ()		Work Phone ()		
Parent's Marital Status (Please circle one)	Married	Widowed	Divorced	Separated
With whom does the child reside?	Both parents	Mother	Father	Guardian

IF APPLICABLE

Guardian's full name			
Home address (if other than above)			
Employer		Employer Address	
Home Phone ()		Employer's Phone ()	

MEDICAL INFORMATION

Emergency Contact: (Other than those already listed)	Relation to the Student		Phone ()
Family Physician	Phone ()	Is your child's immunization record up to date?	If not, please explain:
Parents Signature, indicating everything filled out is correct.			Date

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Registration Fee

- ❖ **There is a \$75.00 registration fee per child.** This fee is charged when the student enrolls and must be paid on day student enrolls along with the first payment of your payment plan. If you enroll more than one student-each student will have a separate registration/achievement test fee that must be paid on day student enrolls.
- ❖ Diagnostic testing is a testing fee of \$50.00 and is only done on an as needed basis.

<u>Tuition Charge:</u>	<u>Semester</u>	<u>1 Year</u>
FIRST Child-----	\$400.00-----	\$600.00
SECOND Child-----	\$300.00-----	\$500.00
THIRD Child-----	\$200.00-----	\$400.00

- ❖ Senior fee is \$25.00.
- ❖ A full tuition for each child covers **one year's time (enrollment date of one year to the same date of the following year) or 12 paces in each subject (5 required subjects for grades 1-8 and 6 subjects for high school, 9-12) which ever comes first. A semester's time is 6 months from the date you enrolled.** This also includes maintenance of all school records, grading of tests, report cards, transcripts, etc.
- ❖ If your child finishes all required work for the current grade level and it is **not** time to re-enroll, then he/she may continue on to the next grade level by paying \$3.00 per pace until 4 weeks prior to the re-enrollment date. You are only allowed to receive **three** paces per subject at any time, **YOU MUST TURN IN THE PACES TO BE CHECKED**, and you have until **4** weeks prior to re-enrollment to do so. However, if your child has not completed the current grade level and a full year (12 months) has passed since the last enrollment, you would then need to re-enroll in order to receive the remaining work regardless of the account balance. If a pace or score key is lost you may purchase another one for \$3.00 each.
- ❖ If you attempt to do two years in one and then transfer to another school, please be aware that school may or may not accept it. So you will want to ask the school you are transferring to before you decide to go on to the next level.
- ❖ We are only allowed to offer you the opportunity to do **two** grade levels in one year. Therefore you may not do more than 144 Pace's or 12 credits in one year.
- ❖ A semester fee of \$400.00 plus registration is required if you need 1 to 3 credits. A full year's tuition plus registration is required if more than 3 credits are needed.
- ❖ Senior's must score within the **norm or above** on the A.C.T., SAT, or Achievement test in order to receive a Diploma. If the Achievement is to be retaken there will be a required fee of \$25.00 per test.
- ❖ Students in grades 1-11 who do not score within the norm or above on the Achievement test could be retained to the previous grade level should they return to public school. Public schools **may or may not** choose to exercise this right.
- ❖ Report cards will not be given if your account is in arrears or if score keys and reading materials are not turned in. A charge will be added to the account if any Home School material is not turned in.
- ❖ Achievement test results are not given out until the entire account has been paid in full.

Payment Plans

- ❖ There is a 10% per tuition discount for payment in full at the time of enrollment.
- ❖ Your first payment will consist of the registration fee/achievement test fee and your first month's tuition.
- ❖ Seniors who have more than one family member on their account will need to have the **entire** account balance paid in full before receiving the diploma or transcripts.
- ❖ We accept Cash, Visa, MasterCard and Checks (driver's license of the person signing check is required).
- ❖ We do not send bills for payment of tuition. (Payment coupons are available upon request) It is the responsibility of the person signing the contract to make sure payment is received by the end of every month. If you fall behind on payments and have not contacted us for other arrangements then your child is considered "**not current**". A behind letter will be sent by mail to inform you of the status of your account. If the account is not current by the second month, we may choose to exercise our right to report the account to our Collection Agency with out notice to you.
- ❖ In the event the account is behind or has been sent to the Collection Agency, your child will not be receiving any books.

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PAYMENT SCHEDULE

	1 Semester Fee	OR	1 Year Fee
	<u>Two Payments of:</u>		<u>Eight payments of:</u>
FIRST Child-----	\$200.00-----		\$75.00
SECOND Child-----	\$150.00-----		\$62.50
THIRD Child-----	\$100.00-----		\$50.00

❖ **To receive the next set of books, reading parts or score keys in each subject your payments need to be as follows:**

<u># of children</u>	<u>2nd qtr. Balance</u>	<u>3rd qtr. Balance</u>	<u>4th qtr. Balance</u>	
One	\$375.00	\$225.00	\$0.00	Please note to receive the last set of books for any student you will need to have a ZERO balance on your account. Monthly payments may need to be adjusted to “keep up” with the student if he/she is working faster than the current payment plan allows. These plans do not include the registration or Achievement test fees.
Two	\$687.50	\$412.50	\$0.00	
Three	\$937.50	\$562.50	\$0.00	
Four	\$1012.50	\$712.50	\$0.00	
Five	\$1437.50	\$862.50	\$0.00	
Six	\$1737.50	\$1062.50	\$0.00	

- ❖ **I understand once enrolled in the system I have 48 hours to cancel my enrollment. Any monies paid, with the exception of the registration fee, will be refunded. Once the 48 hours have passed, I am obligated to pay a semester fee of \$400.00, plus registration fee if I withdraw within 6 months. If I have received 7 or more books in a subject or have been enrolled for 7 or more months, I am obligated to pay the full tuition of \$600.00, plus registration fee. You must have a withdraw form in order to receive a refund.**
- ❖ **I understand that I must notify American Heritage immediately if I have an address change and that American Heritage is not responsible for any work or correspondence that may be lost in the mail due to an address change.**
- ❖ **I understand if I request transcripts from American Heritage, I am required to submit the proper forms, all accounts must be paid in full, and also understand that all requests will take up to 10 business days and no transcripts will be sent during the month of August, nor will any transcript be given to any individual and all transcripts will be mailed to the requested institution.**

I have carefully read the above information and understand the financial information form of American Heritage Academy in its entirety. I fully understand and accept the terms and charges defined therein. I hereby pledge to pay my financial obligations to the school on or before the due date. I also understand that the parent or legal guardian will pay all court cost and attorney fees if necessary should my account go to litigation. If payment is not received within ten days of the date due, at the option of American Heritage Academy, the principal and interest remaining unpaid on the account shall immediately become due and payable without notice. Failure to exercise this option shall not waive the right to exercise it in the event said failure continues, or in the event of subsequent default. Interest upon any payment in default shall accrue at the maximum legal rate. I am fully aware that American Heritage Academy may or may not choose to exercise the right to report any and all accounts to the Collection Agency with or without notice me. Each maker and endorser waives protection and notice of dishonor and agrees to pay all costs including reasonable attorney’s fees and court costs, whether suit is brought or not if counsel is employed in case of default. All court proceedings, if necessary, will be held in Clay County, Florida.

Legal Parent or Legal Guardian Signature

Date

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CHECK-WRITER INFORMATION

If at any time, during the course of your child's/children's education with us, you will be writing a check for payment, please fill out the information below as required by State Law.

Full Name of check writer			Home Phone ()
Address		City	Zip
Age	Sex	S.S.#	DLN
Race	Height	Hair	Eyes
Birth Date	Birth Place	State of Driver's License	Driver's License Expiration
IF YOU ARE SENDING THE APPLICATION BY MAIL PLEASE ATTACH A COPY OF YOUR LICENSE WITH IT.			

If anyone other than the person enrolling this student will be signing or writing a check for payment please fill out the following information as required by State Law. (Mother if father is enrolling, father if mother is enrolling, grandparents, relatives, or friends as the same)

Full Name of check writer			Home Phone ()
Address		City	Zip
Age	Sex	S.S.#	DLN
Race	Height	Hair	Eyes
Birth Date	Birth Place	State of Driver's License	Driver's License Expiration
IF YOU ARE SENDING THE APPLICATION BY MAIL PLEASE ATTACH A COPY OF YOUR LICENSE WITH IT.			

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American Heritage Academy
4325 Highway 17 South Orange Park, Florida 32003
Phone ~ 904-269-2405 Fax ~ 904-264-9791

Automatic Deduction Form

Date: _____

Student/s Name: _____

I agree to have \$ _____ automatically deducted from my (please circle one) Visa, Visa Check Card or MasterCard on the _____ day of each month. I understand that I will not be contacted before each transaction is made. If I decide to cancel this automatic deduction I will notify American Heritage Academy in writing at least one day prior to the aforementioned day. I also understand and agree that under no circumstances will refunds be given.

Automatic deduction will begin upon completion of this form and will continue until otherwise notified in writing. When tuition is paid in full we will contact you for further instruction (re-enrollment or continued education by \$3.00 a book until re-enrollment date).

This is an attempt to fulfill any obligations as agreed upon per your signed contract at the time of Enrollment/Re-enrollment.

Deduction Information

Card Number:	Expiration Date:
Name as it appears on card:	*See Example
Example: John J Doe (no period after middle initial)	
Complete Billing Address:	
Authorized Signature:	
Printed Name:	
Telephone w/ area code: ()	

** I elect **NOT** to be a part of the Automatic Deduction Plan **

Signature (Only if you do not choose to have automatic deduction)

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PARENT INFORMATION SHEET

- _____ I have read and understood the financial information sheet and I agree to all terms and provisions.
- _____ I understand that I am home schooling my student. It is not American Heritage Academy's responsibility to discipline the students who do not do their work. It is my responsibility as the parent/guardian to set up a schedule and grade my student's daily work and to make sure that it is turned in every three weeks.
- _____ I understand that my student must turn in all paces to be checked by American Heritage Academy if they are in grades 9-12 and that any tests that are turned in without the completed pace will be refused. This includes tests that are mailed in.
- _____ I understand that my student will not receive more than three paces in any subject at one time. The next set of paces cannot be issued until all outstanding tests and paces have been turned in from the previous set and my balance has reached the required amount. (See financial page)
- _____ I understand that if my student makes less than a 70% on any test-that exact test will be mailed back to me. My student will have to correct the wrong answers and I will need to return the test back to American Heritage Academy to be re-graded. My student will be given the opportunity to re-take each test a total of three times. If my student fails the test all three times a new pace will be issued and charged to my account. I also understand that the highest grade my student can be given on a retake test is a 70% no matter what they score.
- _____ I understand that American Heritage Academy issues score keys to aid me-not my student. I understand that I am the ONLY one to use the score keys and only for the purpose of grading my students daily work. I will not allow my student to use the score keys to complete their paces. I understand that these score keys are to be returned to American Heritage Academy.
- _____ I understand that if my student does not turn in tests on time or if my account is in arrears-my student will automatically be withdrawn from American Heritage Academy and I can be in danger of violating State of Florida truancy laws.
- _____ I understand that if I do not receive report cards as scheduled according to the school calendar or if I do not receive paces or materials that I have requested within a reasonable period of time, I will contact American Heritage Academy to resolve the situation.
- _____ I understand that if at any time during my students enrollment with American Heritage Academy that if I write a check that is returned by my bank to the school for any reason-I will no longer be allowed to use a check as payment at American Heritage Academy.
- _____ I understand that if I choose to mail my student's paces/tests to American Heritage Academy I understand that I am responsible for either making copies of the tests or I will mail them certified mail. If any of my students paces/tests are lost in the mail and I have not made copies-my student will be required to re-do the materials.
- _____ I understand that American Heritage Academy does not mail any transcripts in the month of August. If I plan to transfer my student to another school I must give American Heritage Academy at least ten days to process the request and that no records or transcripts can be released for any reason unless my account is paid in full.
- _____ I understand that if I find that I am having trouble meeting my financial obligations, I can contact American Heritage Academy to attempt to work out alternative arrangements. I understand that under certain circumstances American Heritage Academy can allow the parent/guardian to "work off" the remaining tuition.
- _____ I understand that regardless of the amount paid toward tuition, I will only receive a maximum of 9 weeks worth of work at a time.
- _____ I understand the curriculum used is Christian based, and is produced by Accelerated Christian Education and Alpha and Omega.

I have read and initialed each item above to indicate that I understand the above information.

Parent/guardian

Date

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STUDENT INFORMATION SHEET

- _____ I understand that my parent/guardian is giving me the opportunity to better my education with an accredited home school with a proven curriculum.
- _____ I understand that it is my responsibility to help my parent/guardian to set up my school schedule and it is my responsibility to follow it to the best of my ability.
- _____ I understand that American Heritage Academy will loan my parent/guardian the score keys to my paces and that in no way am I to use them to complete my paces.
- _____ I understand that it is my responsibility to inform my parent/guardian if I am having problems completing my paces, have difficulty understanding my work or need help.
- _____ I understand that I am responsible for keeping my paces in a safe place and not to lose them. I understand that my school account will be charged a fee if I lose a pace.
- _____ I understand that if I refuse to do my school work, or don't turn it in -I will be in danger of being in violation of the State of Florida truancy laws.
- _____ I understand that if I make less than 70% on any test-that test will be returned to my parent/guardian for me to retake. I am to correct any incorrect answers and have my parent/guardian return the test to American Heritage Academy. I will be given three chances to pass each test. If I fail the test for the third time I will be given the pace again to re-do.
- _____ I understand I am to turn in all completed paces for review by American Heritage Academy in order to receive a credit for that subject (grades 5-12).

I have read and initialed each item above to indicate that I understand the above information.

Student Signature

Date

Student Name Printed

Please print the phrase below:

The quick brown fox jumped over the lazy dogs.

Please write the phrase below in cursive if you are able:

The quick brown fox jumped over the lazy dogs.

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REQUEST FOR TRANSFER OF STUDENT RECORDS/TRANSCRIPTS

Student's full name			
Student's Birth Date:		Current Grade:	
Student's Address:	City	State	Zip

Last School Attended:			
School Address:	City	State	Zip

Please release all records including current grade, grade transcripts, health records, latest test scores and any special educational or psychological test results including confidential materials, results, scores and recommendations pertaining to the above named student as per the requirements of the Family Educational Rights and Privacy of 1974, PL 93-380, Section 438 and State Senate Statue 232.23 and State Board Regulation 62-1.955. Please forward these records to:

**American Heritage Academy
4325 Highway 17 South
Orange Park, Fl. 32003**

Signature of Parent/Guardian OR Student

Date

(Parental permission is no longer required when records are requested by authorized school personnel. Family Education Rights and Privacy Act, Final Rule on Education Records, Federal Register, June 17, 1976, Vol. 41, No. 118, Page 24673).

Internal use only:

School Phone number _____ School Fax Number: _____

1st request: _____ 2nd request: _____ 3rd request: _____ 4th request: _____