



CONTINUOUS ENROLLMENT AGREEMENT

Academic Partnership Terms:

I agree that the term of my student's continuous enrollment begins with this signed agreement and thereafter continues through completion of grade 5 or until Logos Academy Harrisburg (LAH) finds it necessary to withdraw my student in the event of me failing to abide by the terms laid out in this agreement. I will complete a new Scholarship Application and submit last year's 1040 tax form each year by March 15.

I will notify LAH during the "OPT-OUT" period of Feb. 1 to March 31 if my student is not returning for the upcoming school year. If I disenroll my student(s) outside of the OPT-OUT period, I will be contractually obligated to pay one month of tuition as a penalty. LAH recognizes that family plans change. Families disenrolling after the OPT-OUT deadline will be exempt from the one-month tuition penalty under these unique circumstances: moving/relocation 25+ miles away from LAH; educational needs for the student that can no longer be met at LAH (as determined by the Leadership Team; un-enrollment at the request of LAH; other circumstances as approved by the Leadership Team

I accept the school's mission and beliefs, and understand that my student is being taught in a Christ-centered environment with a faith-based curriculum, daily prayers, and weekly chapel service.

I will fully cooperate with the education program of LAH, supporting the academic expectations, attendance guidelines, uniform code, COPPA online policies, restorative discipline, and Code of Conduct policies found in the Family Handbook.

I understand that my student must maintain an adequate academic and conduct record to continue his/her enrollment at LAH. I understand that, as a parent/guardian, I am responsible for the behavior and actions of my student.

I will work with my student's teacher(s) to schedule necessary meetings and will notify teachers if there are circumstances that could potentially affect his/her attitude and/or behavior at school.

I will regularly attend parent/guardian conferences, meetings, and functions when offered.

I will send my student on time, well-rested, and with the necessary materials. I will abide by state attendance laws.

I will respond to daily/weekly communications (via email and in the yellow folder) and will access FACTS, as needed.

I agree to keep my contact information, including address, phone number, and emergency contacts updated by updating my FACTS family portal twice a year, Spring and Fall.

I give permission for my student to participate in all activities or field trips that are within walking distance of the school. (Field trips that require transportation will have a separate permission slip.)

I give permission for photos or videos containing images of my student to be used by LAH for media release.

Financial Partnership Terms:

I agree to complete my scholarship application and provide the requested tax or income information each year by the due date.

I agree to the financial policies set forth in my FACTS payment plan.

I agree to meeting all of my financial obligations promptly, either by paying in full (with a 10% discount) by Aug 1 each year or by paying monthly on the 1st of each month, August through May.

I will notify LAH if/when my financial situation prevents me from making my tuition payments on time. Three missed payments will result in my student's exclusion from school and possible withdrawal by LAH.

My signature signifies my understanding of and agreement to the terms of this Continuous Enrollment Agreement with LAH. I understand that not honoring this agreement causes a tear in my partnership with LAH and may result in the withdrawal of my student.

Signature: _____ Date: _____