Traditional Parent-Directed Enrollment Agreement

A Beka Academy Inc.

P.O. Box 17600 Pensacola, FL 32522-7750, U.S.A.
1-800-874-3592 • abekaacademy.org • Fax: 1-800-874-3593

Host Account No. ☐☐☐☐☐☐☐

Preferred Date to Begin Course ☐☐ ☐☐ ☐☐ *Month Day Year*

Expires March 1, 2010

Check appropriate box: ❒ New enrollment ❒ Reenrollment

Enrollment will be delayed if all sections are not completed.

General Information

Father's Full Name _____ Mother's Full Name _____

Are parents separated or divorced? ❒ Yes ❒ No If yes, with whom does the child live? _____

Church Name _____ Church Affiliation _____

Optional person who may access your account _____ Phone _____

Shipping Address

Physical street address required for all UPS shipments. Day phone required for timely delivery

Street Address _____ City _____ State _____

ZIP _____ Country _____ E-mail Address _____

Home Phone _____ Day Phone _____

Work Phone _____ Cell Phone _____

Correspondence Address

❒ Same as shipping address

Street Address _____ P.O. Box _____

City _____ State _____ ZIP _____ Country _____

Student Information

Student Name _____ Date of Birth _____ ❒ Male ❒ Female

Will student be enrolled in another program while enrolled in *A Beka Academy, Inc.?* ❒ Yes ❒ No If yes, attach a letter of explanation.

Has student ever repeated a grade? ❒ Yes ❒ No If yes, what grade(s)? _____

Home Teacher: Name _____ Education _____

Student ID No. *(if already enrolled)* ☐☐☐☐☐☐☐

Please check the desired grade for enrollment: ❒ K5 ❒ Grade 1 ❒ Grade 2 ❒ Grade 3 ❒ Grade 4 ❒ Grade 5 ❒ Grade 6

Tuition and Other Fees

K5–6 $750 *Must be paid in full*

*Sales Tax applicable for AL, AR, AZ, CA, CO, CT, DC, GA, ID, IL, IN, KS, KY, LA, MA, MD, ME, MI, MO, MS, NC, ND NM, NV, NY, OH, OK, PA, RI, SD, TN, TX, VA, VT, WA, WI, WV, WY, and Canada

TUITION $ _____

SALES TAX* $ _____

APPLICABLE SHIPPING $ _____

Method of Shipping: ❒ UPS—Stateside (free) ❒ UPS—Canada† ❒ Airmail APO/FPO (free) ❒ Airmail—AK, HI and U.S. Terr.† ❒ International Airmail† †*See Shipping Charges chart for costs.*

TOTAL FEES $ _____

Total fee payable upon enrollment

Payment

All payments must be in U.S. funds.

☐ Check Enclosed $_____

- If paying by check, you **must include** Driver's License No.: _____
- Make checks payable to *A Beka Academy, Inc.*
- No postdated checks.
- Returned check subject to service fee.

☐ Bill Mission Board.

Name of board _____

Address _____

City _____ State _____ ZIP _____

Phone (_____) _____

☐ Credit Card Payment Visa® / MasterCard® / Discover® Payment amount authorized $ _____

Required for processing credit card order: *Credit card no., expiration date, security code, and address information*

Credit Card No. ☐☐☐☐-☐☐☐☐-☐☐☐☐-☐☐☐☐ Expiration Date ☐☐ ☐☐ *month year*

P.O. Box, Route, or House No. ☐☐☐☐☐☐ ZIP ☐☐☐☐☐☐☐☐☐

Security Code (include last 3 digits from strip on back of card) ☐☐☐

X _____ _____

Cardholder's Signature Date

Agreement

I am enrolling the afore-mentioned student in the *A Beka Academy, Inc.,* Traditional Parent-Directed program. I understand that enrollment may be terminated or student records withheld at any time at the discretion of *A Beka Academy, Inc.,* because of noncompliance with guidelines or failure to keep my account current. *A Beka Academy, Inc.,* reserves the right to deny enrollment to any student who does not meet admission requirements. *A Beka Academy* is not available to residents of Pensacola, FL, and the immediate surrounding area. I understand that *A Beka Academy, Inc.,* does not discriminate on the basis of race, color, or national origin. **I understand it is my responsibility to meet all applicable local and state home school requirements. It is my responsibility to contact my local school district to determine if there are any additional requirements in my state for children who are home schooling.** I understand that accreditation is a voluntary process which verifies that *A Beka Academy* meets reliable education standards. Some schools may require additional validation of academic achievement. I understand that I am responsible for the contents of the *A Beka Academy* Traditional Parent-Directed brochure and specifically the policies for cancellations and late work. Prices are subject to change without notice. Books are the unconditional property of the user and cannot be returned for credit. If return is made, credit will not be issued, nor return made to sender. Contract governed under the State of Florida's provisions. This agreement does not become effective until accepted and ratified by *A Beka Academy, Inc.*

The undersigned hereby acknowledges that he or she has carefully reviewed, approved, and accepted the terms of the foregoing agreement.

_____

Signature of Parent or Legal Guardian

_____

Print Name Here

_____

Date