



PICKENS ACADEMY

PROVIDING A QUALITY EDUCATION SINCE 1970

Admission Form

Application for enrollment in Pickens Academy and membership in Pickens Private Foundation. I hereby make application for my child/children to enter Pickens Academy beginning _____ (date).

Section I

Full Name of Student: _____

Social Security Number: _____

Date of Birth: _____ Grade in which to be enrolled: _____

Full Name of Student: _____

Social Security Number: _____

Date of Birth: _____ Grade in which to be enrolled: _____

Full Name of Student: _____

Social Security Number: _____

Date of Birth: _____ Grade in which to be enrolled: _____

Full Name of Student: _____

Social Security Number: _____

Date of Birth: _____ Grade in which to be enrolled: _____

Section II

Guardian 1

Name: _____

Address: _____

Home Phone: _____ Work Phone: _____

SSN: _____ Relation to Student(s): _____

Guardian 2

Name: _____

Address: _____

Home Phone: _____ Work Phone: _____

SSN: _____ Relation to Student(s): _____

Section III

Does/Do child/children live with

____ both parents or ____ mother or ____ father or ____ other*

*Name and Address

*Relationship to child/children: _____

Section IV. Emergency Contacts

Emergency Contact 1

Name: _____

Phone: _____

Emergency Contact 2

Name: _____

Phone: _____

Section V

Declare your Public School District: _____

Section VI

List reason(s) you desire to transfer/enroll your child/children at Pickens Academy.

Section VII

Previous schools attended

Dates attended

1. _____
2. _____
3. _____

Section VIII

Have any of your children experienced any trouble in any previously attended school?

Yes___ No___ If yes, please explain_____

Section VIX

The following is a summary of payments due for pre-registration and registration. Please carefully review the Enrollment Agreement for specific information regarding payments.

Schedule of Payments – Due at Pre-Registration for the 2023-2024 School Year

1. Family Registration Fee	\$100.00 per child
2. Athletic Booster Club Fee*	\$100.00 (Per Family)

**Will not be deposited until August 1, 2023 and are Non-Refundable after August 1, 2023.*

Tuition

Grades K3-12	\$4200 per child
Donation to Pickens Private School Foundation*	\$500

**Due the first year a new family enters Pickens Academy for 2023-2024 school year.*

**Can be split into \$250.00 1st Semester (August) and \$250.00 2nd Semester (January)*

**This donation is tax deductible and non-refundable.*

2023 – 2024 Tuition Schedule

	<u>1 child</u>	<u>2 children</u>	<u>3 children</u>	<u>4 children</u>
<u>Monthly</u>	12 x \$350	12 x \$700	12 x \$1050	12 x \$1400
<u>1 x pay</u>	\$4,150	\$8,300	\$12,450	\$16,000

Tuition may be paid in full at time of registration or in 12 monthly bank drafts, (August – July).

A Senior's tuition must be paid in 10 monthly drafts (Aug-May). For monthly payments, a voided check or deposit slip must be submitted at the time of registration.

In the event a family withdraws from Pickens Academy any time after Spring Registration is complete through December 31, they will be required to pay a \$2000.00 penalty per child. If a family withdraws during the 2nd semester a \$1000.00 penalty per child will be assessed. All fees owed to any organization must be paid in full before any records or transcripts are released.

If registration occurs after the beginning of school, all of the above applies with these exceptions. Monthly tuition begins with month at the time of registration with subsequent bank drafts for the remainder of the school year. Families enrolling during any month must pay for a full month's tuition for that current month.

I certify that my child/children is/are of sound moral character and is/are in good physical and mental health. I have read the admissions standards, the financial information, and will abide by the polices described therein. Furthermore, I understand that any false information or the absence of pertinent facts that would deny acceptance will be grounds for immediate dismissal.

Parent/Guardian Signature: _____ Date: _____

This form must be completed and turned in to:

Pickens Academy
225 Ray Bass Road
Carrollton, AL 35447

Enrollment Agreement

In consideration of the acceptance of this Enrollment Contract by Pickens Academy the undersigned agrees to pay the required tuition and fees as specified below:

Registration (Non-Refundable): \$100.00/child

Choose one option:

_____ Annual Payment

One payment of _____ Is due prior to August 1st

_____ Monthly Draft Payment

Twelve payments in the amount of _____ are drafted on the 1st day of each month, Aug-July.

I understand that my obligation to pay the tuition and fees for the full academic year is unconditional and that after registration no portion of tuition/fees paid or outstanding will be refunded or cancelled in the event of absence, withdrawal, or dismissal from Pickens Academy. In the event that a family withdraws from Pickens Academy anytime after Spring Registration is complete through December 31st, they will be required to pay a \$2000.00 penalty per child. If a family withdraws during the second semester a \$1000.00 penalty per child will be assessed.

I also understand that a fee of \$30.00 will be assessed for any returned checks. Should collection become necessary, all reasonable costs of collection, including court cost expenses, and reasonable attorney's fees will be paid by the undersigned.

In signing this Enrollment Contract for the coming academic year, I am agreeing to accept the rules and regulations of Pickens Academy as stated in the Student's Handbook and the rule concerning payment of tuition and fees as referred to above. Furthermore, I agree to the policy of Pickens Academy that no student's grades or transcripts will be released unless an account has been paid in full.

This contract shall be interpreted in accordance with the laws of the State of Alabama. My signature below affirms that I have read, understood and accept the terms and conditions of this contract.

Signatures of parent/s or guardian/s financially responsible for student/s

1) _____ Address: _____ Date: _____

2) _____ Address: _____ Date: _____

Student/s Name/s:

1) _____ 3) _____

2) _____ 4) _____

To be completed by School:

_____ Accept _____ Decline Date: _____ By: _____