



FINANCIAL AGREEMENT

DUE MAY 15, 2019

6036 South 27th Avenue, Phoenix, AZ 85041 | 602-268-8686 x13 | Mueller@ALAcoyotes.org

Student Name(s) _____ Grade _____
 _____ Grade _____
 _____ Grade _____

OFFICE ONLY: Fed NonFed

Parent/Guardian Names _____

I/We, the parent(s) or guardian(s) of the above named student(s) at Arizona Lutheran Academy, authorize Arizona Lutheran Academy to release information regarding this student(s) tuition account to the following:

- Only the name(s) listed above.
- The name(s) listed above and the following:

Name of person: _____

I understand that by signing this authorization, I am giving Arizona Lutheran Academy permission to release the financial records of my student(s) to the persons specifically listed above. This release does not permit the disclosure of these records to any other persons without my written consent. I will not hold Arizona Lutheran Academy liable for releasing this financial information to the persons listed above.

Email address (ALA tuition statements will be emailed)

FINANCIAL POLICIES

Please initial policies below, signifying you understand and are willing to comply.

____ All families are required to create an account and register for tuition payments with FACTS Management Company, a tuition management service. We/I understand a payment will be automatically withdrawn from a bank account or applied to a credit card.

____ We/I understand all financial agreements made are a commitment between parent and ALA and an investment in my child/ren. We/I have a financial responsibility to keep our/my commitment when enrolling our/my student(s). We/I will communicate with ALA directly regarding any changes made to this commitment.

____ All accounts with FACTS must be current. Any account that is delinquent 30 days will result in a meeting with ALA Administration.

____ FACTS will assess a \$30 fee when there are insufficient funds within an account from which payment is to be drawn.

____ FACTS will attempt a second payment withdrawal fifteen (15) days after the first attempt that was not successful.

____ FACTS will attempt a third payment withdrawal for two separate payments (past and current payment) fifteen (15) days after the second attempt that was not successful.

____ All accounts of senior students must be paid in full before a diploma is received.

____ Official high school transcripts will be held until the account is paid in full.



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TUITION RATES

Federation Rate:	\$9685	Second student \$8,935	Third student \$8685
2-Payment Plan:	\$4842.50		
Monthly Plan:	\$807.09		

Non Federation Rate:	\$10,185	Second student \$9435	Third student \$9,185
2-Payment Plan:	\$5092.50		
Monthly Plan:	\$848.75		

BILLING/PAYMENT PREFERENCES Choose only one of these payment options.

Option 1 **Payment in Full** | Total tuition will be due in July 2019.

OR

Option 2 **2-Payment Plan** | First half of the tuition will be due in July 2019, second half will be due in January 2020.

OR

Option 3 **12 Monthly Payments** | July 2019 through June 2020

NOTE:

The ALA business office understands families depend on tuition assistance to help with the financial responsibilities. Scholarships are applied when received throughout the year. When scholarships are received and applied, the monthly payment may be adjusted. If scholarships received and applied exceed the tuition amount, personal payments made can be redirected to other fees, applied to future school years or refunded to parents.

Monthly Payment Amount: Please indicate the amount you will pay to ALA through FACTS.

\$_____ monthly

[other options may be approved: semi-monthly (twice a month) or bi-weekly (every two weeks)]

SIGNATURES

By signing this document, I acknowledge that I understand and agree to the financial policies and agreements of Arizona Lutheran Academy as indicated in this document. This will be placed in my record and will be in effect for the 2019-2020 school year, unless I notify Arizona Lutheran Academy, in writing, of a change.

Father/Guardian Signature _____ Date _____

Mother/Guardian Signature _____ Date _____