SPRING VALLEY ACADEMY

TUITION PAYMENT PREFERENCE FORM

School Year Responsible Parent Name: Address: _____ City, State, ZIP: _____ Student(s) Name(s): Choose one of the following options: **Year in Advance.** The full tuition payment is <u>due by August 10</u>. This will entitle the Option 1 parent to a 2.5% discount on tuition. Refer to the Tuition Schedule. ____ Option 2 **Semester in Advance.** First semester tuition payment is due by August 10. Second semester tuition payment is due by January 10. This will entitle the parent to a 2% discount on tuition. Refer to the Tuition Schedule. ____ Option 3 **Set up monthly auto credit card payment.** Parents may pay tuition by completing the credit card authorization form which must be completed and returned to the SVA Business Office by August 1. Charges are processed on the 10th of each month. August through May. ____ Option 4 **Online monthly payment** Parents may pay tuition by going to the SVA website and clicking on 'payment' tab at the top of the page. After you click on it you will be guided through the process. ____ Option 5 Monthly by check in the mail or check, cash, credit card at the Front Office. Payments are due on the 10th of each month, August through May. I AGREE TO BE RESPONSIBLE FOR THE FINANCIAL OBLIGATIONS OF STUDENT(S) NAMED ABOVE. I HAVE READ THE SVA FINANCIAL INFORMATION AND AGREE TO PAY IN HARMONY WITH THEM.

Date

Responsible parent signature