



Tuition Protection Agreement

I understand that my obligation to pay the tuition and all applicable fees for the full academic year is unconditional and that no portion of such tuition or applicable fees paid will be refunded should student withdraw or be dismissed from SES for any reason either voluntary or involuntary.

In view of this obligation, I understand that the option to participate in the Protect My Tuition plan is being made available to me at this time to protect my yearly financial obligation under the terms of the Enrollment Agreement. This program insures fees (prepaid and due) in the event of separation according to the terms of the policy.

I have received and read the enclosed brochure, Protect My Tuition, detailing the terms and conditions of coverage concerning this Plan. It is imperative that Box A or B below is checked for each child enrolled.

- One of these boxes MUST be checked
- A. I **wish to participate** in the Protect My Tuition plan. The annual premium fee are as follows, \$152 for one student, \$304 for two students and \$456 for three students. The insurance premium fee will be drafted through my FACTS account on 7/1/2017. I authorize the School to process and collect any claim payment to which I am entitled under the Protect My Tuition plan and credit it to my FACTS account, paying any excess to me. I understand that my acceptance of the plan cannot later be canceled.
 - B. I **do not wish to participate** in the Protect My Tuition plan. I understand that no refund or cancellation of the yearly fees will be made by the School for absence, withdrawal or dismissal before the end of the school year and herewith agree to assume responsibility for the full annual Tuition fees.

My signature below affirms that I have read, understand and accept the terms and conditions as outlined in the attached brochure, Protect My Tuition.

Signature of Parents or Guardians Financially Responsible for Student:

Date: _____

1. _____ Address _____
2. _____ Address _____

ACCEPTED: **St Edward Church and School**

Date: _____ by _____