

Pre-paid Tuition Contract

We are pleased to confirm receipt today of your check in the amount of \$ _____, representing pre- payment toward educational tuition, for _____ who is/will be a student at Valley Lutheran High School. This sum will pre-pay tuition for the following school year(s) _____, _____, _____, _____.

The undersigned enter into this agreement with the following understandings:

- Tuition rates (Association, Non-Association LCMS, and Community) are based on the legal guardians' current eligibility as confirmed by his/her pastor or designee. (i.e. If the legal guardians currently belong to a congregation which is a member of the Valley Lutheran Association, they will receive the Association rate)
- If the legal guardian is currently eligible for the Professional Church Workers Grant it will be applied to the tuition rate.
- Students with pre-paid tuition are not eligible for need-based financial aid.
- Pre-paid tuition applies only to payment specifically identified as tuition; it does not include fees and other charges.
- Pre-payments for tuition at current rates must be made by July 31 and no pre-payments will be accepted between August 1 and December 31.
- Pre-paid tuition is only transferable within the child's immediate family. (i.e. brothers and sisters, including those legally adopted)
- If the pre-paid tuition is not used by the child or transferred to a sibling, then a \$500 administrative fee will be charged and the remaining original purchase price (no earnings) will be reimbursed to the original purchaser or his/her designee as identified in the agreement. The request for a refund must be made in writing.
- If the actual enrollment date for high school is different than the projected date listed when the tuition was pre-paid, there will be no change in the student's benefits.
- If Valley Lutheran High School ceases operations prior to the full use of this pre-paid tuition the unused portion of the original payment (no earnings) shall be paid as designated below.

Amendment. This Agreement shall not be amended, altered, or terminated except by a writing executed by each party.

Governing Law. This Agreement shall be governed in all respects by the laws of the State of Michigan.

Entire Agreement. This Agreement sets forth the entire understanding of the parties; further, this Agreement shall supersede and/or replace any oral or written Agreement(s) relating to this subject matter entered into by the parties before the date of this Agreement.

Waiver. The waiver by any party of any breach or breaches of any provision of this Agreement shall not operate as or be construed to be a waiver of any subsequent breach of any provision of this Agreement or the transaction described herein.

It is understood and agreed that you, your heirs and estate will indemnify and hold the School harmless from and against any costs or liabilities, including costs and liabilities for any tax consequences, and including attorneys and other professional fees, incurred in connection with or resulting or arising from this agreement.

If the above terms and conditions are acceptable to you, please complete the information below, sign two original copies of this agreement, and return them to the school. A fully executed copy of this contract will be returned to you.

Date: _____ Amount Enclosed: _____ Check #: _____

Payer Name: _____ Relationship to Student: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Parent/Guardian Name (if different): _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Student's Name: _____ Current Age/Grade: _____

Street Address (if different): _____

City: _____ State: _____ Zip Code: _____

In event the student named is unable to attend Valley Lutheran High School and the payer is not able to accept the reimbursement as described above, the following shall be designated to accept the reimbursement payment:

Name: _____ Relationship to the Payer: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

In order to assess the correct tuition rate please complete one of the following:

Confirmation of Association Congregational Membership (Association Rate Only)

I confirm the parent/guardian named above is a member of _____ Lutheran Church located in _____ (city/town) and eligible to receive the tuition rates of a Valley Lutheran High School Association Member.

Pastor or Designee

Or

Confirmation of Eligibility for the Non-Association LCMS Rate (members of LCMS congregations not members of the Valley Lutheran Association)

I confirm the parent/guardian named above is a member of _____ Lutheran Church located in _____ (city/town) and eligible to receive the tuition rates of a member of a non-association LCMS congregation.

Pastor or Designee

Or

Confirmation of Eligibility for the Non Association LCMS Rate as a Current Student in an LCMS School

I confirm the student named above attends _____ Lutheran School located in _____ (town/city).

Principal or Designee

Professional Church Worker Grant

I am eligible to receive the Professional Church Worker Grant as a pastor/teacher /youth director serving at _____ Lutheran Church or School.

Eligible Parent/Guardian Named Above

The undersigned acknowledge and confirm that they have read the above agreement and agree to be bound by the terms thereof to the extent applicable to them or their child and further agree to indemnify and hold harmless the School in the same manner and to the same extent as described above. The undersigned further acknowledge and agree that nothing herein contained will be deemed in any respect to limit the obligations of the undersigned under the enrollment contracts from time to time entered into with the School or under the procedures, terms and conditions from time to time in effect and generally applicable to students at the School.

_____ Parent/guardian #1 Signature

_____ Parent/guardian #2 Signature

_____ Payer (if different) Signature

Date: _____

On behalf of Valley Lutheran High School I confirm receipt of the payments listed above which will be used for tuition payments for the student listed and the understandings as described above.

Signature: _____

Date: _____

Title: _____