

FLCA FAMILY FEES AGREEMENT

I, _____, hereby acknowledge and agree to the following terms and conditions for the enrollment of the student(s) named below, for whom I am a parent/guardian below and who have been accepted for enrollment into Footprints for Learning Society, located in Airdrie, Alberta:

Student(s) First and Last Name(s):

1. **Deposit:** A deposit of \$225 per family is upon acceptance each school year. The exact date will be included in the Letter of Acceptance. This deposit will be credited towards the total fees owing in September. The deposit is non-refundable if a family withdraws before September of the applicable school year. Similarly, if a student withdraws partway through the school year, fees for the entire school year will not be refunded or prorated. In such a case, the total outstanding fees will be due upon the date of the student's withdrawal.
2. **Fee Arrangements:** Fee arrangements are only available for families who provide a PAD (Pre-Authorized Debit) Agreement. Families opting for alternative payment methods such as cheque or e-transfer must pay a deposit of \$225 by the applicable deadline and settle the remaining outstanding fees by September 15th of the upcoming school year.

Payment Options: Please initial beside your chosen payment option:

- One Payment Option:** On the Deposit Deadline of the current school year, a deposit of \$225 will be withdrawn from my account. The remaining outstanding fees will be withdrawn on September 15th of the upcoming school year. If the date this agreement is received, is after the specific dates indicated, the applicable fees/deposit outstanding will be processed promptly by administration, typically within a week of agreement submission.
- Two Payment Option:** On the Deposit Deadline, a deposit of \$225 will be withdrawn from my account. The remaining fees outstanding will be divided into two equal payments due on September 15th and February 15th of the new school year, respectively. If the date this agreement is received, is after the specific dates indicated, the applicable fees/deposit outstanding will be processed promptly by administration, typically within a week of agreement submission.
- Four Payment Option:** On the Deposit Deadline, a deposit of \$225 will be withdrawn from my account. The remaining fees outstanding will be divided into equal payments due on September 15th, December 15th, March 15th, and June 15th of the new school year, respectively. If the date this agreement is received, is after the specific dates indicated, the applicable fees/deposit outstanding will be processed promptly by administration, typically within a week of agreement submission.
- Non-PAD Agreement Option:** I will not provide a PAD agreement and associated payment option but will instead provide a deposit of \$225 by the Deposit Deadline of this school year. Subsequently, I will pay the remaining fees outstanding by the 15th of September of the applicable school year. If the date this agreement is received, is after the specific dates indicated, I will settle the outstanding deposit and/or fees within a week of submitting this Agreement. All payments will be sent by e transfer to finance@footprintsforlearning.com.

I acknowledge that if there are any changes in rates after signing this agreement for the current school year, I will be informed via email at least 10 days before the start of the school year. If I do not communicate my disagreement with the rate change in writing within 10 days, it will be considered as my full acceptance and agreement of the change, and this agreement will be binding accordingly. If I do communicate that I disagree with the rate change within 10 days of the notice, I will have my enrollment withdrawn and will be refunded my deposit accordingly.

Parent/Guardian Signature

Date

FLCA PRE- AUTHORIZED DEBIT AGREEMENT (PAD)

Please complete this form to begin making Pre-Authorized Debits (PAD) to Footprints for Learning Society.

School Information:

School Name:
Address:

Parent/Guardian Information:

Parent or Guardian First/Last Name(s):			
Child(ren) First/Last Name(s):			
Address:			
City:	Province:	Postal:	
Telephone:	Check which type of PAD this is:	<input type="checkbox"/> Personal	<input type="checkbox"/> Business

Please attach a VOID check or fill in the information below:

Name of Bank and Address Branch:	
Account Number:	
Transit (Branch) Number:	Financial Institution (Bank) Number:

I/We authorize Footprints for Learning Society to charge my balance owing from my/our bank account, in accordance with the option I selected above. Upon a change in tuition rates Footprints for Learning Society is authorized to change the amount of the payment by giving me/us 10 days written notice of the change in rates. Failure on the part of the myself/us to advise in writing of my/our disagreement with the change in the amount within 10 days, shall be deemed to be full acceptance of such change.

I/We agree to notify Footprints for Learning Society in writing within 30 days of any change to bank account information. Should any bank payments not clear or are not honored by my/our financial institution for any reason, authorization is hereby given to Footprints for Learning Society to collect the amount refused or dishonored plus a \$40 non-sufficient fund (NSF) fee.

This authorization may be canceled at any time upon written notice, to Footprints for Learning Society subject to providing 30 days' notice. I/We have certain recourse rights if any debit does not comply with this agreement. For example, I/we have the right to receive reimbursement for any debit that is not authorized or is not consistent with this PAD agreement. To obtain more information on my/our recourse rights, I/we may contact my/our financial institution or visit www.cdnpay.ca

Date:	Signature:	Signature:
	Printed Name:	Printed Name: