



The Learning Center

HILL COUNTRY CHRISTIAN SCHOOL OF AUSTIN

GATE PROGRAM STUDENT ENROLLMENT FORM

Upper School
2012-2013 School Year

Student Name _____ Grade (next year) _____
 Parent(s) Name _____ Re-enrollment: Yes _____ No _____
 Phone _____ e-mail _____

I am requesting that my child receive GATE (Gifted and Talented Enrichment) services through The Learning Center. I agree to pay Hill Country Christian School of Austin for these services, and understand that I will be billed according to the payment method indicated below.

Payment Options (please check one)

Full Day Program	
<input type="checkbox"/> Annual	\$200 non-refundable deposit AND one total payment of \$800 _____ payable by check at time of enrollment _____ payable through TADS on August 5, 2012
<input type="checkbox"/> Semi-Annual	\$200 non-refundable deposit payable by check at time of enrollment AND two equal payments of \$400 (payable through TADS on September 5, 2012 and January 5, 2013)
<input type="checkbox"/> Monthly	\$200 non-refundable deposit payable by check at time of enrollment AND ten equal payments of \$80 (payable through TADS on the 5 th day of each month from August 2012 through May 2013)

Half Day Program	
<input type="checkbox"/> Annual	\$200 non-refundable deposit and one final payment of \$300 (payable through TADS on September 5, 2012)

Please sign and return this enrollment form to Wendi Trevino in the school office in order to secure a spot. Space is limited and students will be placed on a wait list if capacity is reached for their grade level.

I understand that this is a commitment for the school year, and that if I choose to withdraw my child from the GATE program after August 1, 2012, I will be responsible for full fees for the remainder of the semester. Withdrawal requests submitted by August 1, 2012, will be refunded amounts paid, minus the enrollment deposit.

I have read, understand, and agree to terms of this contract set forth by The Learning Center (TLC) at Hill Country Christian School of Austin.

 Parent(s) Signature _____
Date

For TLC - HCCSA Use Only

Date Rec'd	Amt.	Ck #	School Office - Wendi Trevino	Director of TLC - Irma Plaza