



Equipping children for life through Christ-centred curriculum that promotes intellectual, social, physical and spiritual excellence for the purpose of training our children to serve God and to become faithful stewards of His world.

SCHEDULE OF FEES (2016/2017)

The purpose of our fee schedule is to outline the financial policies of the Delta Christian School Society, which allows us to offer the distinctive services of Delta Christian School to the Christian community. In the interest of fairness and to clearly establish the Society's sole purpose as an educational organization, these fees are firm for all persons using the services of the Society.

1. MEMBERSHIP FEE:

We are required by the government to maintain an exact membership list. Society members must pay an annual fee of \$5.00 per member. Society members must be at Delta Christian School for at least one year; attend two orientation sessions, attend a Bible believing church and sign a constitutional agreement statement.

2. REGISTRATION FEE:

Families registering children or lapsed families re-registering children in our school must pay a fee of \$200.00 per family. This fee is non-refundable and must be included with the Student Registration Form.

3. PARENT PARTICIPATION FEE:

This is an initiative introduced to encourage additional volunteer time from our community. You are requested to submit a cheque in the amount of \$200.00 per family, post dated to June 1, 2016. The general concept is that you will earn back your \$200.00 by volunteering time to the school.

4. OCCASIONAL COSTS:

From time to time students are invited to participate in special projects or events, which require additional funds. You will be advised when such costs arise.

5. TUITION GUIDELINES:

Parents who will require financial assistance in the form of tuition reduction for the 2016/2017 school year are requested to complete the 'Tuition Assistance Application' form available through the office.

Applications must be renewed annually and submitted to the office by June 10th for review by the Treasurer. Parents whose tuition fee payments fall into arrears and who fail to make further arrangements with the Treasurer, will in time be required to withdraw their children from the school.

Tuition fees are due in the school office by June 10th. Re-enrolment for the next school year may be suspended if tuition fees remain owing or if no arrangement for payment is reached by June 15th.

6. TUITION FEES:

Students	1	2	3+
Tuition	\$ 6,500.00	\$ 8,000.00	\$ 9,500.00
Payment in full by September 15 th (deduct 4%)	\$ 6,240.00	\$ 7,680.00	\$ 9,120.00
Half payment by September 15 th , half by January 15 th (deduct 1.5%)	\$ 6,402.50	\$ 7,880.00	\$ 9,357.50
12 month payment plan	\$ 541.66	\$ 666.67	\$ 791.67
10 month payment plan	\$ 650.00	\$ 800.00	\$ 950.00

- Families with children attending another SCSBC Christian School, as well as DCS, are allowed to deduct 30% from the applicable total.
- Parents are requested to use pre-authorized debits for the 1st of each month or another suitable specific day of the month (e.g. 15th).
- A \$20.00 service charge will be applied for returned items.

7. INCOME TAX RECEIPTS:

In most cases, a significant portion of the tuition fees will be deemed a charitable donation for Income Tax purposes. Official income tax receipts will be issued in February based on a **calendar** year on eligible amounts.



Delta Christian School
4789-53rd St.
Delta, B.C., V4K2Y9

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AGREEMENT TO PAY FORM

I/We, _____ of _____
(Please print name) (Address)

have read the tuition guidelines and agree to pay the total Tuition Fee for the upcoming 2016/2017 school year as per the attached Schedule of Fees.

Signature _____ Date _____
Father or Guardian

Signature _____ Date _____
Mother or Guardian

- Payment in full by September 15th (deduct 4%)
- Half payment by September 15th, half by January 15th (deduct 1.5%)
- Other children enrolled in SCSBC schools (deduct 30%) – please attach supporting documentation
- I/We are attaching a void cheque for pre-authorized debits to our bank account.
Please specify day of month for withdrawal _____ Monthly amount _____
- Other arrangements Explain _____

If someone other than you will be paying all or part of tuition, please complete the following:

Name _____ Phone _____
 Address _____ Postal Code _____
 Relationship to student _____
 Amount _____

If you have any questions, please contact the office or the Treasurer.