



INSPIRING SCHOLARS

13671 Veterans Memorial Hwy Winston, GA 30187

678-561-7458

info@inspiringscholars.com

2022-2023 Transportation Agreement

Contract agreements are between Inspiring Scholars Academy and the following:

I agree to allow Inspiring Scholars to provide transportation service for my child/children

_____, _____, _____ to travel
between home and schools. I understand that my child will be transported with other students.

Annual Registration fee of **\$75.00**

PAYMENT AGREEMENT: \$_____ **WEEKLY**

SCHEDULED PICK UP CHILD/CHILDREN ADDRESS: _____

DAYS(Circle): M T W Th F

TIME(S): _____ (am/pm) _____ (am/pm)

DROP OFF CHILD/ CHILDREN ADDRESS: _____

ROUND TRIP (Circle one): **YES** or **NO** If Yes, **DAYS** (Circle): M T W Th F

TIME(S): _____ (am/pm) _____ (am/pm)

PARENT/ GUARDIAN INFORMATION

MOTHER'S NAME: _____

EMPLOYER: _____ **EMAIL:** _____

WORK ADDRESS: _____ **CITY:** _____ **STATE:** _____

ZIP: _____ **WORK PHONE:** _____ **CELL PHONE:** _____

FATHER'S NAME: _____

EMPLOYER: _____ **EMAIL:** _____

WORK ADDRESS: _____ **CITY:** _____ **STATE:** _____

ZIP: _____ **WORK PHONE:** _____ **CELL PHONE:** _____

FEE AGREEMENT (INITIAL EACH LINE)

All custodial parents and/or legal guardians are required to sign a Fee Agreement prior to enrollment at **Inspiring Scholars Academy**. Parents are required to indicate to whom all billing information and correspondence is to be addressed. Please read and initial this agreement.

____ (Initial) Your child must be ready at the scheduled pick-up time. Once the driver arrives, your child has two (2) minutes to enter the vehicle before being considered a **"No Show"**. The driver WILL NOT ring the doorbell. For each **"No Show"** you will be assessed a **\$20.00** service fee.

____ (Initial) Rude and unruly behavior will NOT be tolerated. Riding privileges may be discontinued immediately for disruptive behavior. No refunds will be given for unruly behavior.

____ (Initial) I agree to notify Inspiring Scholars in advance of any scheduled absences or requested schedule changes. My child may be considered a **"No Show"** if I do not notify scheduled changes and may be subject to a **\$20.00** service fee. I understand Inspiring Scholars are responsible for my child from the time of pick up until they leave our charge.

____ (Initial) I understand Inspiring Scholars Academy will charge a **\$5** service fee for check and money orders

____ (Initial) I understand Inspiring Scholars Academy will charge a \$36.00 fee for tuition checks returned by the bank.
Returned tuition checks will not be re-deposited.

____ (Initial) I understand that Inspiring Scholars Academy does not accept cash

____ (Initial) I understand payments are due each Friday for the next week of care.

____ (Initial) I understand Inspiring Scholars Academy will charge a \$25.00 late fee if payment is not received by close of business day Monday. Late fees will be charged weekly on all accounts with outstanding balances no matter the enrollment status.

____ (Initial) I understand my child will be withdrawn Wednesday if payment including late fees are not made by close of business Tuesday. Termination of services for non-payment does not eliminate the mandatory two-week notification for your child(s) withdrawal.

____ (Initial) Official notification for withdrawal from Inspiring Scholars requires a minimum of two week notice in writing.

____ (Initial) I understand I will lose my sibling discount if my payment is late twice (2 times) within a school year.

____ (Initial) I understand tuition is not prorated and is due in full whether or not my child attends Inspiring Scholars.

____ (Initial) I understand there is no credit/reimbursement given for scheduled school holidays, child illness, children with behavior issues, or for closings due to emergency situations, or inclement weather.

____ (Initial) I understand Inspiring Scholars does not offer a refund on Registration and/or Service payments

____ (Initial) I understand Inspiring Scholars Academy charges a **\$1.00** per minute per child late fee after agreed pick up time.

____ (Initial) I acknowledge that Inspiring Scholars charges \$75.00 for annual school registration.

____ (Initial) Delinquent accounts sent to collections will be charged a 30% collection fee in addition to the remaining balance.

____ (Initial) **Tuition Express** I understand and agree that any outstanding balance that is owed at the time of ending services will be deducted automatically from the information given on the Tuition Express form.

____ (Initial) **Please be advised you must provide your driver's license and a completed Tuition Express form to keep on file.**

Vehicle Emergency Medical Information

CHILD'S NAME: _____ DATE OF BIRTH _____

MOTHER'S NAME: _____ PHONE: _____

FATHER'S NAME: _____ PHONE: _____

ADDRESS: _____ CITY: _____

STATE: _____ ZIP CODE: _____

Person to notify in an emergency parent can't be reached

NAME: _____ PHONE: _____

CHILD'S DOCTOR: _____ PHONE: _____

Medical facility the center uses: **WellStar Douglas Hospital**

Current prescribed medication: _____

Child's special needs and conditions: _____

Child's Allergies: _____

In the event of an emergency involving my child and emergency contact can't be reached. I hereby authorize any needed emergency medical care. I further agree to be fully responsible for all medical expenses incurred for the treatment of my child.

CHILD'S NAME: _____

PARENT'S SIGNATURE: _____



Automated Payment Processing Safe – Convenient – Easy

We are excited to offer the safety, convenience and ease of Tuition Express® – an automatic payment processing system that allows on-time tuition and fee payments to be made from either your bank account or credit card.

ELECTRONIC FUNDS TRANSFER AUTHORIZATION FOR **BANK ACCOUNT** and **CREDIT CARD**

I (we) hereby authorize (business name) _____ ☐ to initiate credit card charges to the below referenced credit card account (Section A) OR, ☐ initiate debit entries to my (our) Checking or Savings Account, indicated below (Section B). To properly affect the cancellation of this agreement, I (we) are required to give 10 days written notice. Credit Union Members: Please contact your Credit Union to verify account and routing numbers for automatic payments. Check with the center for accepted credit card types.

SECTION A

Cardholder Name	Phone #		
Cardholder Address	City	State	Zip
Account Number	Expiration Date	CVV #	
Cardholder Signature	Date		

SECTION B

Your Name	Phone #		
Address	City	State	Zip
Bank or Credit Union Name			
Bank or Credit Union Address	City	State	Zip
		<input type="checkbox"/> Checking	<input type="checkbox"/> Savings
Routing Transit Number (see sample below)	Account Number (see sample below)		

For Official Use Only

Date Received

Employee Signature

John Sample Mary Sample 123 Nice Street Anytown, USA	BANK OF THE WEST 555-555-5555	00226
Pay to the order of: Attach Voided Check Here \$		
Deposit slips not accepted Dollars		
123456789012	18003388	0226
Routing Number	Account Number	Check Number

A service of



Transportation Agreement

Parent Copy

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- Rude and unruly behavior will NOT be tolerated. Riding privileges may be discontinued immediately for disruptive behavior. No refunds will be given for unruly behavior.
- Inspiring Scholars must be notified in advance of any scheduled absences or requested schedule changes. My child may be considered a **"No Show"** if I do not notify scheduled changes and may be subject to a **\$20.00** service fee. I understand Inspiring Scholars are responsible for my child from the time of pick up until they leave our charge.
- All custodial parents and/or legal guardians are required to sign a Fee Agreement prior to enrollment at **Inspiring Scholars Academy**. Parents are required to indicate to whom all billing information and correspondence is to be addressed.
- Inspiring Scholars Academy will charge a **\$5** service fee for check and money orders
- Inspiring Scholars will charge a **\$36.00** fee for tuition checks returned by the bank. Returned tuition checks will not be re-deposited.
- Inspiring Scholars does not accept cash
- Payments are due on Fridays for the following week of care
- Inspiring Scholars Academy will charge a **\$25.00** late fee if payment is not received by close of business day Monday. *Late fees will be charged weekly on all accounts with outstanding balances no matter the enrollment status.*
- Services will be withdrawn Wednesday if payment including late fees are not made by close of business Tuesday. This withdrawal doesn't eliminate the mandatory two week notice for withdrawal
- Official request for withdrawal from Inspiring Scholars requires a minimum of two week notice in writing.
- Sibling discount benefits will be discontinued if there are 2 consecutive late payments of tuition.
- Refund Policy: No refunds will be given on registration or service payments
- Tuition is prorated and is due in full whether or not my child attends Inspiring Scholars Academy.
- There are no credit/ reimbursements given for scheduled school holidays, child illness, children with behavior issues, or for closings due to emergency situations, or inclement weather.
- Inspiring Scholars charges **\$75.00** for annual registration.
- Delinquent accounts sent to collections will be charged a **30% collection fee** in addition to the remaining balance.
- **Please be advised you must provide your driver's license and fill out the Tuition Express form to keep on file.**