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## Enrollment Agreement

### Terms and Conditions

\_\_\_\_\_  
(initial)

I understand that this application will make me eligible for an available space for my child or I will be placed on the waiting list. ENCLOSED IS THE **ONE-TIME**, UP-FRONT, NON-REFUNDABLE REGISTRATION FEE of \$300 AND WILL BE CASHED UPON RECEIPT, UNLESS I AM **NOT** OFFERED A SEAT. In case a class is cancelled before the start of the school year, all fees will be returned.

\_\_\_\_\_  
(initial)

I understand that my obligation to pay the fee as outlined in the tuition sheet **2026-2027** is unconditional and that no portion of the fees paid or outstanding will be refunded or cancelled in the event of absence **or withdrawal** from Pearls Academy. I also understand that I am still responsible for the registration, supply, and book fees, **as well as any tuition owed; these are non-refundable, regardless of** the reason.

\_\_\_\_\_  
(initial)

I understand there will be a **\$35 fee** for any failed transactions on Gradelink.

\_\_\_\_\_  
(initial)

I understand that in signing this Enrollment Agreement for the **2026-2027** academic year, the parties hereto agree that the program makes all policies regarding operational and educational matters, and the rules concerning payment of fees as stated above.

\_\_\_\_\_  
(initial)

I hereby give permission to Pearls Academy, Tranquil Hearts **Inc.**, to seek emergency medical treatment for my student(s) in case I cannot be contacted by phone. I will be responsible for all expenses incurred for any treatment.

\_\_\_\_\_  
(initial)

I understand that **Pearls Academy sends text alerts regarding school updates and** I will be responsible for all related charges from my carrier. I will in no way hold Pearls Academy responsible for any charges that may arise from this service. Pearls Academy will not share, sell or exchange any cell phone number with any person or entity.

\_\_\_\_\_  
(initial)

I understand that I am required to fulfill a minimum of **10** volunteer hours per year. If I am not able to volunteer, I agree to pay **\$15** for each unfulfilled volunteer hour. If I volunteer and do not fulfill all **10** hours, I agree to pay for the unused hours at the end of the school year.

Student name: \_\_\_\_\_

Academic Year: \_\_\_\_\_

Parent Signature: \_\_\_\_\_

Date: \_\_\_\_\_

