

AS-SAFA ACADEMY FINANCIAL AGREEMENT

I, _____, agree to pay the tuition as
Name of the Parent/ Legal Guardian

stated in As-Safa Academy Handbook along with all the fees on time. I understand that As-Safa Academy has the right not to allow my child from attending if the tuition is not paid. I also agree to the withdrawal policy which states: **If the student withdraws during the first four weeks of school, the parents will pay only the tuition for one month. However, the nonrefundable fees will not be returned. If the student withdraws after the first four weeks of school, the parents will receive 75% of the remaining tuition. Tuition will be charged for the month which he/she partially attended. None of the nonrefundable fees will be returned.**

Signature of the Parent

Date

