



## Statement of Cooperation

It is my understanding that the policy for the school is to make no refunds on the registration fee(s). I agree to pay all tuition and fees as set by Northeast Christian Academy in accordance with school policy and failure to make payments could result in Northeast Christian Academy forwarding this to a Collection Agency and the Credit Bureau. I further understand that if I fail to make payment in full that my child's school records will not be released. I give Northeast Christian Academy permission for my child to take part in all school activities away from school premises. I give permission for school personnel to make and enforce classroom disciplinary regulations. I further agree to hold the school and its agents harmless for any liability to my child or any guardian or parent thereof because of any claims against the school or any agent due to injury or alleged injury to my child. Should legal action, for any reason, be taken against Northeast Christian Academy or any employee or agent thereof, and the school or its agent not be found at fault, I agree to pay any attorney fees, court fees, damages or other costs that Northeast Christian Academy or its agent should incur to defend itself against such action.

(Both Parents Must Sign)

\_\_\_\_\_  
Female Guardian (Mother)

\_\_\_\_\_  
Male Guardian (Father)

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Driver's License Number

\_\_\_\_\_  
Driver's License Number