



ENROLLMENT CONTRACT ADDENDUM
SOCIAL SECURITY NUMBER

STUDENT NAME (PLEASE PRINT) _____ GRADE APPLYING FOR _____

Because credit is extended to families for tuition, fees, and charges to the School Store and the Cafeteria, the School requires your Social Security number. This information will be requested only once and only on this document. This Contract will be stored in a locked file; only Business Office personnel will have access to it when necessary. You can decline to give the information, but in that case the School cannot extend credit and all tuition and fees will be due in advance by the August payment date and purchases in the School Store and the Cafeteria will have to be paid for in cash at time of purchase.

PARENT NAME (PLEASE PRINT) _____ SSN _____

NAME (SIGNATURE) _____ RELATIONSHIP TO STUDENT _____

PARENT'S DOB: _____ (MM/DD/YYYY)

PARENT NAME (PLEASE PRINT) _____ SSN _____

NAME (SIGNATURE) _____ RELATIONSHIP TO STUDENT _____

PARENT'S DOB: _____ (MM/DD/YYYY)