

# Centreville Academy, Inc.

P. O. Box 70

1419 Academy Street

Centreville, MS 39631

(601) 645-5912 or (601) 645-5990 (Phone)

(601) 645-5940 (FAX)

catigers@bellsouth.net

Jason Horne  
Administrator

Quality Education  
S.A.C.S. Accredited

Parents and Guardians,

The highest compliment our parents can pay us is the referral of new families, and in return, we would like to thank our families by offering a new tuition incentive program for the 2019-2020 school year. The trust and confidence that you place in us each and every day means a great deal.

On January 7, 2019, the Board of Directors gave approval to offer a new family referral incentive for the 2019-2020 school year. The New Family Referral Incentive Program awards a referring Centreville Academy family with a **\$600 tuition credit** (\$50 monthly discount for 2019-2020 school year) for each new family that is referred and actually enrolls in and attends Centreville Academy.

The referral program is for parents or guardians who are paying tuition for enrolled students (K3 through grade 12) currently attending Centreville Academy.

Referred families must be enrolled and approved by Administration between February 1, 2019, and August 1, 2019. Referred families will receive **50% off the first semester tuition** (June-Nov).

A signed New Family Referral Incentive Program form must be completed by both current and new families. The application will then be reviewed and approved by the headmaster and board of directors.

Failure to turn in a completed Referral Incentive Program form will make the referring family and current family ineligible for the tuition incentive.

New families are families that currently have no membership with Centreville Academy and has not had students enrolled in the school for 2 calendar school years.

Sincerely,

Jason Horne

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## Centreville Academy New Family Referral Incentive Program Form

Name \_\_\_\_\_

Phone Number \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_

How were you referred to Centreville Academy  
\_\_\_\_\_

Enter the name of the Parent/Family who referred you \_\_\_\_\_

Current School \_\_\_\_\_

Student Name \_\_\_\_\_

Entering Grade Level \_\_\_\_\_

Additional Student(s) Name \_\_\_\_\_  
\_\_\_\_\_

Grade Level(s) \_\_\_\_\_

Signature Current Family \_\_\_\_\_

Signature New Family \_\_\_\_\_

Signature Headmaster \_\_\_\_\_