

GATEWAY CHRISTIAN ACADEMY

“A Ministry of Gateway Church”

2130 N.W. 26th Street • Fort Lauderdale, Florida 33311

Telephone: (954) 485-7012 • Fax: (954) 485-6929 • E-mail: gca@gateway-ministries.org

www.mygatewaychristianacademy.org

Bishop Dr. Preston Williams II, Senior Pastor

Dr. William Latson, Principal

2024-2025 PRESCHOOL SCHEDULE OF FEES AND TUITION

Ages 1 to 4 years

ANNUAL REGISTRATION - \$225.00

VPK ONLY STUDENTS: \$0.00 (8:30 am to 11:30 am)

**FULL TIME
MONTHLY
PROGRAM**

**WEEKLY
TUITION
(Due every Friday)**

**MONTHLY
TUITION**

1 & 2 year olds

\$200.00

\$800.00

3 year olds

\$190.00

\$760.00

4 year olds

\$190.00

\$760.00

***VPK Wrap-Around**

\$370.00

GRADUATION: VPK/ WRAP AROUND/PK4 \$100.00 Due May 1st

“TRAINING AND DEVELOPING FOR EXCELLENCE!”

MISSION STATEMENT

Gateway Christian Academy’s mission is to partner with families in training and developing the whole child for excellence: spiritually, intellectually, physically, socially, and emotionally. We provide excellent yet affordable Bible-based curriculum and programs. Our school fosters an environment that nurtures, challenges and encourages each child to learn about Jesus Christ, study the Bible, and participate in the Christian life. We help students to develop skills that will enable them to become life-long learners in the academic process. To this end, the students of Gateway Christian Academy will reach their optimal potential for the honor and glory of God.

GOALS

By creating an atmosphere of teamwork, trust and the truth of the Gospel, our faculty and staff work together to impart to each child the following:

- Growth in a personal relationship with Jesus Christ through prayer and service to others
- A good, positive self image
- A happy, healthy and active physical body
- The ability to discover his or her own creative potential
- The ability to make Bible-based decisions
- The ability to have and make friends as a well-balanced contributing member of society
- Master the basic age level academic skills.

STATEMENT OF NON-DISCRIMINATION

Gateway Christian Academy admits students of any race, color, national or ethnic origin to all the rights, privileges, programs and activities made available to students of the school.

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PRESCHOOL *VPK (10 monthly payments) Monthly Payment Schedule Tuition and Lunch Fees

No.	Due Date	Past Due Date
1	August 1, 2024	August 3, 2024
2	September 1, 2024	September 3, 2024
3	October 1, 2024	October 3, 2024
4	November 1, 2024	November 3, 2024
5	December 1, 2024	December 3, 2024
6	January 1, 2025	January 3, 2025
7	February 1, 2025	February 3, 2025
8	March 1, 2025	March 3, 2025
9	April 1, 2025	April 3, 2025
10	May 1, 2025	May 3, 2025
11	June 1, 2025	June 3, 2025
12	July 1, 2025	July 3, 2025

MONTHLY/WEEKLY TUITION PAYMENTS

Any **monthly** tuition payment not paid by Noon on the 3rd of each month is considered delinquent. A late fee of \$30.00 will automatically be charged.

Weekly tuition payments are due each **Friday** for the following week and are past due if not paid by Noon on Monday. A late fee of \$20.00 will be automatically charged.

SCHOOL LUNCH PROGRAM

*For your convenience, Gateway offers a catered lunch program by an independent vendor through the National Lunch Program. Students must have an application on file with the school to receive benefits.

PRESCHOOL - SUMMER MONTHS

In order to accommodate our parents, a two-week tuition waiver may be granted for vacation time for PK1 – PK3 students. The two weeks must be taken between July and August. Please note that the second week must be taken **during** the week of Gateway Christian Academy staff planning; prior to the beginning of the new school year. This accommodation is only available after continuous enrollment during the month of June. If you choose to take more than two (2) weeks you will be charged 30% of the monthly tuition to retain your child's space

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PRESCHOOL ENROLLMENT CONTRACT

We the undersigned, hereby enroll _____ as a student at Gateway Christian Academy for the school year **2024-2025**. We understand that this is a tuition contract for the entire school year, and that the full amount is due by **August 1, 2024**. We also understand that the early withdrawal of the student **will not** release us from this financial agreement nor entitle us to a refund unless Gateway Christian Academy agrees to suspend this contract. **If a check is presented for payment, we expect it to be honored by our bank. If not, we agree to pay a fee of \$30.00, and the check will be redeemed in cash or cashier's check. We understand also that after two checks are returned, all further payments must be made in cash or cashier's check. We also understand that the Registration Fee is due at the signing of this contract and that it is non-refundable.***

Name: _____ Signature: _____ Date: _____
Parent or Guardian

Name: _____ Signature: _____ Date: _____
Parent or Guardian

DEFERRED MONTHLY PAYMENT AGREEMENT

We the undersigned hereby request permission to pay the contracted Tuition of:

- **\$9,600.00 in twelve monthly installments of \$800.00 per month for ages 1 and 2**
- **\$9,120.00 in twelve monthly installments of \$760.00 per month for ages 3 and 4 (Non VPK)**
- **\$3,700.00 in ten monthly installments of \$370.00 per month for age 4 (VPK Wrap-Around)**

due on the first day of each month, beginning August 1, 2024, and concluding on July 1, 2025. We understand that there is no interest charge and that Tuition is the main source of funds for Gateway Christian Academy and therefore agree to make sure our payments are made on or before the due date. We also understand that a late fee of **\$30.00** will be assessed for any payment not made by **Noon on the third day of each month.** We understand that if we decide to keep our child home for any reason, we will be required to pay the tuition in full for that period of absence as part of this contractual agreement. We also understand that if payment is not received by the 15th of the month, our child will not be permitted to attend school until the account is brought current. Interest of 1.5% per month will be charged on any amount not paid by the end of the month in which the said amount is due. This amount will be added to the account. In the event it is necessary for the school to employ an attorney to collect the funds due, we will be responsible for all attorney fees and/or collection costs incurred by the school until the account is paid in full.*

Name: _____ Signature: _____ Date: _____
Parent or Guardian

Name: _____ Signature: _____ Date: _____
Parent or Guardian

DEFERRED WEEKLY PAYMENT AGREEMENT

We the undersigned, hereby enroll _____ as a student at Gateway Christian Academy for the school year **2024-2025**. We understand that **this is a tuition contract for the entire school year**, and that the **weekly tuition is due on Friday of each week or on the third of each month if tuition is paid monthly.** We also understand that a late fee of **\$20.00** will be assessed for any payments not made by Noon on Monday (weekly tuition). We understand that the early withdrawal of the student **will not** release us from this financial agreement nor entitle us to a refund unless Gateway Christian Academy agrees to suspend this contract. **If a check is presented for payment, we expect it to be honored by our bank. If not, we agree to pay a fee of \$35.00, and the check will be redeemed in cash. We understand also that after two checks are returned, all further payments must be made in cash. It is clear to us that PK1-PK3 students (ONLY) may take ONE Week vacation during the school year after six months of continuous enrollment and (before June 1). Tuition will be waived for this period only. This time off may also be used for illness. (See Parent & Student Handbook).**

Name: _____ Signature: _____ Date: _____
Parent or Guardian

Name: _____ Signature: _____ Date: _____
Parent or Guardian

*All parties responsible for tuition payments must sign.

1-24-2024