



FINANCIAL COMMITMENT
AGREEMENT
2026-2027 School Year

110 Robinwood Drive SW
Fort Walton Beach, FL 32548
850-243-8913 / Fax 850-243-7895

PARENT/GUARDIAN'S NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

Are you MILITARY: **Father** - Active Duty _____ Retired _____ Veteran _____ Reserves _____ N/A _____

Mother - Active Duty _____ Retired _____ Veteran _____ Reserves _____ N/A _____

E-MAIL ADDRESS _____ PHONE _____

FULL NAME AND GRADE OF STUDENT(S) REGISTERED

1. _____ GRADE _____ 4. _____ GRADE _____

2. _____ GRADE _____ 5. _____ GRADE _____

3. _____ GRADE _____ 6. _____ GRADE _____

CHECK BOX FOR SCHEDULE

(K3 Student(s) Only) 5 FULL 5 HALF 3 FULL 3 HALF

CHECK BOX FES-EO FES-UA FTC Murtha Poschel Tuition Assistance VPK AM Only

Payment Options:

OPTION 1 – Single Payment due July 1st

OPTION 2 – FACTS 10-month payment plan

Student(s) on Bus _____ (Bus Name)

Student(s) in Morning Care

Student(s) in After Care

I understand that this commitment form represents my family's financial agreement for this school year for my student(s) in grades K3 through 8. I further agree to read and abide by the rules and policies set forth in the Parent Student Handbook and as presented by the Classroom Teacher and do waive any right to the receipt of mid-term exams, report card(s) and/or the forwarding of transcripts in the event of a tuition and/or fees delinquency.

Parent/Guardian Signature: _____ Date: _____

Received By: _____ Date: _____