



# ST. MAARTEN ACADEMY

Cupper Drive #2, Cul de Sac, Sint Maarten

Tel: +1 (721) 548-3412

stmaartenacademy@gmail.com

## Parental Contract with the St. Maarten Academy

The undersigned, parent / guardian .....  
of student .....

Herein after "the Student"

Date of Birth (dd-mm-yyy) ..... in (Place of Birth) .....

Request admission of the student to the St. Maarten Academy (FAVE) under the following conditions:

1. That all registration requirements are complete (i.e) Registration, Non refundable deposit of USD 111.00 or NAFL. 200.00 (part of the Parental Contribution). Remaining full contribution prior to August 10, 2020 is USD 450 or NAF 810
2. ALL PAYMENTS must be done via **REPUBLIC BANK** to the following Account Numbers **USD 407-414 OR NAF 407-515**. Please provide proof of payment.
3. Valid picture identification, original census registration, two(2) passport pictures, complete registration form, copy of birth certificate, copy of passport and complete uniform.
4. Signed contract that I, agree that my child / children will appear at school every day in complete uniform.
5. That the rules and regulation of the school will be upheld and declare that the consequences for infraction are known and supported by me (parent / guardian and student). I declare to have received a copy of the rules and regulations of the school.
6. I will be responsible for all damage(s) caused in or at school by the student.
7. I am aware of the following regulations:
  - Proper Uniform attire (No saggy pants)
  - Boys wearing earrings are forbidden
  - Lateness & absenteeism is not accepted or tolerated
  - Excessive jewelry is forbidden
  - Possession of electronic devices, cellular phones etc. is forbidden
  - Possession of weapons, drugs, and firecrackers and/or alcohol is forbidden
  - No Fighting
  - Zero tolerance with regard to weapon(s), alcohol and/or fighting

Please return this signed contract to the school along with the application form the admission.

**AMOUNT of PARENTAL CONTRIBUTION ..... (USD / NAFL)**

Address Parent / Guardian .....

District / Region .....

Telephone number +1 (721) .....

E-mail .....

.....  
Signature Parent / Guardian

.....  
Date (dd-mm-yyyy)