

TUITION AGREEMENT

FATHER'S NAME _____ Address _____ City _____ Zip _____
First Last

MOTHER'S NAME _____ Address _____ City _____ Zip _____
First Last

Name of person(s) responsible for tuition payments _____
Address _____ City _____ Zip _____ Telephone _____

Name of Parish you belong to: _____ City _____ Do they have a school No Yes

First and last name of Child/children and Grade(s) (as of September 2020)

1. _____ Grade _____ Parent's Religion _____
2. _____ Grade _____
3. _____ Grade _____ Child/Children's Religion _____
4. _____ Grade _____

Student lives with:

Both Parents Mother Father Mother & Stepfather Father & Stepmother Other: _____

Payment Plan: Paid In Full 10 Monthly Payments

Will you be applying for Financial Aid? (FACTS Application must be filed for consideration) No Yes

Are you an Active military member? No Yes

YEARLY FEES:

Family Registration Fee: Registration Fee \$125.00 applies.

Workbook & Materials Fee due by September 30th.

One child \$100.00. Second child \$100.00. Third child \$50.00

As the parent(s) or legal guardian(s) of our child(ren), students at St. Stanislaus School, I (we) agree to pay the annual tuition cost for our child(ren) as noted above. Payment is understood and agreed to be paid, either in full prior to July 15, 2020 with a 2% discount, or in ten (10) equal monthly installments beginning July 15, 2020 and ending with the final payment due no later than April 15, 2021.

I (We) understand that there is a \$10.00 per month late charge if tuition is not paid by the 15th of the month. Further, I (we) understand that there is a \$25.00 fee charged for every check returned by the bank for insufficient funds.

I (We) acknowledge that if I (we) fail to follow the installment schedule as stated in the St. Stanislaus School Handbook, the school may refuse attendance of my child(ren).

I (We) understand that there is an annual \$100.00 per child Workbooks and Materials Fee. I (We) understand that payment of this fee must be made between July 2020 and September 30, 2020.

I (We) realize that if the entire tuition balance is not paid in full by the end of the current school year, the account will be sent to a collection agency and legal action will be taken. I (We) will be responsible for any fees or costs incurred in this process.

I (We) agree to all policies and regulations as so defined in the St. Stanislaus School Handbook.

Parent(s) or Guardian(s) Signature(s) _____ **Date** _____

_____ **Date** _____