



**TUITION CONTRACT /
NON-PRACTICING
CATHOLIC OR
NON-CATHOLIC
2008-2009**

Person to be billed: _____

Address: _____

City and Zip: _____

Phone (Home): _____ (Work) _____ (Cell) _____

Parish: _____

Student's Full Name	Male or Female	Grade Entering In Fall	Date of Birth
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

IF A KINDERGARTEN REQUEST IS BEING MADE, PLEASE INDICATE PREFERENCE:
 FULL DAY AM PM

TUITION PAYMENT SCHEDULE – NON-PRACTICING OR NON-CATHOLIC

PLEASE CHECK APPLICABLE PLAN

<input type="checkbox"/> 1 Child	\$4,865	<input type="checkbox"/> ½ Day Kindergarten	\$3,210
<input type="checkbox"/> 2 Children	\$9,730	<input type="checkbox"/> ½ Day Kindergarten + 1 Child	\$8,075
<input type="checkbox"/> 3 Children	\$14,595	<input type="checkbox"/> ½ Day Kindergarten + 2 Children	\$12,940
<input type="checkbox"/> 4 Children	\$19,460		

Note: If your child attended St. Louis Early Learning Center during the 2007-2008 school year, you are entitled to a discount off of your kindergarten tuition upon enrollment at St. Louis Catholic School Kindergarten. The discount is calculated based upon 10% of the total ELC tuition paid for the 2007-2008 school year.

- 1. PAY IN FULL: One Payment By May 15, 2008 and receive \$100.00 discount per family
- 2. SEMI-ANNUAL: Two payments due May 15, 2008 and December 1, 2008
- 3. FACTS: Ten (10) monthly payments automatically deducted from your bank account
- 4. FACTS: Twelve (12) monthly payments automatically deducted from your bank account
- 5. FACTS: Quarterly payments: The following withdrawal dates MUST be listed on the FACTS Automatic Payment Agreement (May 20, 2008, August 20, 2008, Nov. 20, 2008 and Feb. 20, 2009)

****Any deviations from the plans listed above will only be accepted upon written notice from Father Tim Gaines****

Students will NOT be admitted without a signed 2008-2009 school tuition contract.

See Reverse Side

TUITION POLICY

Any discount received in a previous school year must be re-applied for in the current school year.

DECLARATION OF PARENT(S) (Both Parent(s) Must Sign, if applicable) AND/OR GUARDIAN(S)

We have read and understand the Tuition Policy of St. Louis Catholic School. With this understanding, we wish to enroll our child(ren): _____

_____ for the 2008-2009 school year.

Parent/Guardian Signature

Print Name

Date

Parent/Guardian Signature

Print Name

Date

Principal's Signature

_____ We have enclosed with this signed contract, our registration fee payment of \$130.00 per family for the 2008-2009 school year. (The \$130 registration fee will only be refunded if there is no placement of your child(ren) in our school for the 2008-2009 school year.)

OFFICE USE ONLY

Initial Tuition Rate: _____

Financial Assistance (if applicable) _____

Tuition Reduction (if applicable) _____

Total Tuition Due after deductions _____

Type of Assistance or Reduction: _____

- _____ FACTS Grant & Aid
- _____ Seeds of Hope
- _____ Pastor Approval
- _____ ELC 10% Kinder Credit
- _____ Payment in Full (\$100)
- _____ Employee Discount

Adjustments: _____

Approved by: _____ Date: _____

Registration Payment Received: _____ Check # _____ Cash Payment _____

Office Employee Signature