

**St. Joseph Catholic School
Financial Agreement Form 2010-2011
Tuition Policy**

Family Name: _____

Tuition payments must be made regularly according to this financial agreement signed by each family. Please read carefully the following form and choose the method of payment that is best for your family in the coming school year. Tuition amounts are as stated on the enclosed page, but do not include TRIP credits, Scholarship amounts, or credits and/or balances from a previous year. **All families must complete this form and have it turned in to the school office before September 10, 2010**

TUITION PAYMENT OPTIONS: (please check one)

_____ Tuition Payment in Full by the first day of school

_____ Semester payments—half by first day of school and balance due at beginning of 2nd semester.

_____ Monthly payments due on the 5th day of each month, September through June.
(\$15 late fee will be applied for any payment not received by the 15th of the month)

Automatic withdrawal is now available, please fill out the enclosed Ivory form and return to the school or parish office.

CONFIRM TUITION RATE BY CHECKING BOX A OR BOX B:

- A. As parent or guardian, we are active members of St. Joseph Parish and will qualify for the in-Parish tuition rate because:
1. Either myself or my spouse is a practicing Catholic, registered, and contributing financially to the Parish.
 2. I/We, in the spirit of stewardship, recognize our obligation and responsibility to support St. Joseph Parish with time, talent, and treasure.
- B. I/We agree to pay the Out-of-Parish tuition rate.

I have read and understand the FINANCIAL AGREEMENT INFORMATION listed above. I understand that in signing this tuition agreement, I am agreeing to accept the policies, rules, and regulations of St. Joseph Catholic School, as well as the payment schedule set forth herein.

Date: _____

Signature of Parent or Guardian

Date: _____

Accepted by: _____

Representative of St. Joseph Catholic School