



## Non-Parish Tuition & Fees Payment Agreement 2017-2018

Father's Name: \_\_\_\_\_ Work or Cell: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Work or Cell: \_\_\_\_\_

Home Address: \_\_\_\_\_

City and Zip: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Are you a Brainpower employee? \_\_\_\_\_ If so, please indicate if mother or father is the employee (circle one)

**Recruitment Referral:** Referring Family Name: \_\_\_\_\_

### LIST CHILDREN REGISTERED FOR 2017-2018

|    | <u>Name (Last, First)</u> | <u>Grade for 2017 - 2018</u> |
|----|---------------------------|------------------------------|
| 1. | _____                     | _____                        |
| 2. | _____                     | _____                        |
| 3. | _____                     | _____                        |
| 4. | _____                     | _____                        |

### PAYMENT OPTIONS

| <u>Grade Levels</u>                          | <u>Fees</u>   | <u>12 Month</u> | <u>Annual 3% Discount</u> |
|--|---------------|-----------------|---------------------------|
| K3   | \$450.        | \$6400.         | \$6208.                   |
| K4   | \$450.        | \$6400.         | \$6208.                   |
| K5 – 8 <sup>th</sup>                         | \$450.        | \$5800.         | \$5626.                   |
| K5 – 8 <sup>th</sup> (Each Additional Child) | \$450. (Each) | \$4800. (Each)  | \$4656. (Each)            |

**ALL** Tuition, Fees, and ASC payments **require** an automatic draft/credit card form.



# Non-Parish Tuition & Fees Payment Agreement 2017-2018

## TUITION & FEES PAYMENT AGREEMENT

**(Returning Students:** I agree to pay \$125. at **Re-registration** for each child).

I agree to pay \$ \_\_\_\_\_ for tuition/fees each month for \_\_\_\_\_ months for the School year 2017-2018 beginning \_\_\_\_\_. I understand that **ALL** tuition, Fees, and ASC payments **require** an automatic draft/credit card form. I also understand that any/all NSF Bank Drafts or Credit Card transactions will result in a \$35 fee. I understand that my child can be withdrawn from St. Peter's School the first day of the second month that tuition is not paid unless a formal written payment agreement has been approved by the Principal or designee. I agree to pay After School Care per ASC Contract on a monthly basis. Other financial obligations (e.g., fines, damaged and/or lost property charge, etc.) will be paid in a timely manner. **ALL Tuition & Fees are Non- Refundable.**

\_\_\_\_\_  
**Parent/Guardian Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Relationship to student(s)**

\_\_\_\_\_  
**Social Security Number of Responsible Party**