

St Paul Lutheran Church & School Registration & Payment Agreement

School Year 2018 - 2019

Parent Name(s): _____ Date: _____
Billing Address: _____
Phone Number: _____
E-Mail Address: _____

Tuition

<input type="checkbox"/>	Member Rate: \$1,250	Name: _____	Grade: _____
<input type="checkbox"/>	Child #2: \$1,000	Name: _____	Grade: _____
<input type="checkbox"/>	Child #3: \$ 750	Name: _____	Grade: _____
<input type="checkbox"/>	Non-Member: \$2,500	Name: _____	Grade: _____
<input type="checkbox"/>	Child #2: \$2,250	Name: _____	Grade: _____
<input type="checkbox"/>	Child #3: \$2,000	Name: _____	Grade: _____

Fees

<input type="checkbox"/>	Registration - \$300	<input type="checkbox"/>	Catechism (7/8) - \$15.00
<input type="checkbox"/>	Technology - \$100	<input type="checkbox"/>	Scholastic News (K, 1st, 2nd, 4th) - \$6.00
<input type="checkbox"/>	Assembly Fee - \$10	<input type="checkbox"/>	All God's People (2nd) - \$15.00
<input type="checkbox"/>	Payment Plan Fee - \$50	<input type="checkbox"/>	Athletic Fee - \$50.00

Financial Aid Amount Gifted: _____ Total Due: \$ _____

Payment Plans (initial preferred option)

Option 1: Pay in full via any payment methods.

Option 2: Pay over 10 months (August - May) - ACH or credit card on file
>> Requires monthly installments of \$ _____ per month
>> We will charge your credit card or debit ACH bank draft on the 10th of each month
Note: if the 10th is on a weekend/holiday, we charge the business day prior

Option 3: Pay over 6 months (August - January) - Manual pay (check, cash or credit card)
>> Requires monthly installments of \$ _____ per month
>> Late fees of 1% of the balance due will be assessed for payment received (not postmarked) after the 10th of each month.

Certification (initial each box)

I understand and agree that I am responsible for all tuition and fees assessed per this schedule as indicated above.

I understand and agree that I am responsible for all fees incurred due to declined credit cards or checks returned from the bank.

I understand and agree that I am responsible for additional fees should this account go to collections due to non-payment of account.

Parent or Guardian-Signature

Parent or Guardian-Signature

Parent or Guardian-Printed Name

Parent or Guardian-Printed Name