



ST. JOSEPH INTERPAROCHIAL SCHOOL
Tuition Payment Plan & Fees
Financial Contract
2018-2019 Academic Year

Students' Names _____ Grade _____
 _____ Grade _____
 _____ Grade _____
 _____ Grade _____
 _____ Grade _____

Registration Fee: \$200 per child registering. This fee can be paid in two installments, the first being due when registration papers are returned to school, final payment due June 1. ***Registration will not be processed and students will not be placed into classrooms until full registration fee is paid.***

Technology Fee: \$20 per student 4th – 8th grade due August 10, 2018

Office use only:	check/cash _____
	date: _____

Tuition Payment Plan: I plan to pay tuition according to the following plan:

- _____ Payment in full by August 10, 2018
- _____ First payment by August 10, 2018 and second by January 7, 2018
- _____ 10 Month plan (August – May) First payment by August 10, 2018
- _____ 12 Month plan (June-May) First payment by June 1, 2018
- _____ Other (Please specify plan – must be approved by Principal)

* I understand a \$15 late fee will be assessed for payments returned after the 10th of the month.

Financial Assistance Program: To qualify for the Financial Assistance Program you must be a participating member of Holy Spirit or St. Joseph Parish. You must complete an online application through **Facts Management**.
 see back for more information

The deadline for applying is May 19, 2018.

_____ I will be applying for financial assistance.

SCRIP Program: As a condition of registration, each family agrees to generate at least \$125 in profit through the SCRIP program during the school year or pay the \$125 fee. **More information can be found on the school website.*

- _____ I will participate in the SCRIP program and earn my credit by purchasing SCRIP cards.
- _____ I will pay the mandatory \$125 by March 1, 2018

School-Aged Childcare (SACC): SACC operates from 3:00-5:30 every school day except the last day of school (175 days), at a cost of \$10.00 per child. Families have an option of paying this cost monthly if they know they will use the program on a daily basis.

- _____ I will pay the monthly cost of \$130 with my tuition. (This is a savings of \$200 if you plan to use the program daily.)
- _____ I will use SACC on a drop-in basis and will pay the daily rate of \$10.00 per child at the end of each month.

I have read and understand my financial obligations as stated above

Signature: _____ **Date:** _____