



SAINT ANNE CATHOLIC SCHOOL

1131 NE 10th Street Grants Pass, OR 97526 (541) 479-1582

2010-2011 Tuition Agreement Contract

Name(s) of Child / Children:	'10-'11 Grade:	Tuition:	Registration:	Books:
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

I/We agree to all of the following for the 2010-2011 school year.

- To pay the non-refundable registration fee, with the minimum of \$75.00 per child at the time of registration. Balance of registration fee and book fee to be paid in full by either June 30th or August 1st, 2010.
- To be responsible for a full semester's tuition upon the student having begun the term. Failure to pay may result in dismissal of my child from Saint Anne Catholic School.**
(* Note: First Semester = September thru January; Second Semester = February thru June).
- To pay the tuition for my student(s) in a timely manner, via one of the following options.
 - Traditional: Payment by the 10th of each month, beginning with Sept. 10th, 2010.
 - Electronic Funds Transfer: Auto deductions either monthly, or semi-monthly from my checking account (via the 10th and/or 25th of each month).
- To enroll in mandatory Electronic Funds Transfer (EFT) if my account is in arrears more than 30 days without 'extenuating circumstances' having been brought to the attention of the principal. Failure to enroll in EFT may result in dismissal of my child from Saint Anne Catholic School.
- Any scholarship award to my child/children will be prorated by 10 months.
- In the event that an account is turned over to collection because of non-payment, Saint Anne Catholic School reserves the right to add any and all collection fees, interest, court costs and legal fees to the balance of tuition. In the event the student withdraws from school, all balances owed the school will then be due immediately.

Total Registration:	Total Books:	Total Tuition (Before any scholarship award):
\$ _____	\$ _____	\$ _____

I/We understand that my/our student(s) cannot be assured enrollment unless any outstanding 2009-2010 tuition and fees and all registration fees for the 2010-2011 school year are paid in full by August 1st, 2010. I/We understand and agree to comply in full with the provisions of this tuition agreement.

_____	_____	_____
Guardian / Father's Signature	Home Phone Number	Day/Work Number
_____	_____	_____
Guardian / Mother's Signature	Home Phone Number	Day/Work Number

Person Responsible For Payment: _____

_____	_____
Name	Relationship

_____	_____	_____	_____
Address	City	State	Zip

_____	_____
Email	Date

<p><u>Tuition Reduction Option (Circle one)</u></p> <p>5% Pd. in full / \$500 Rebate / Free child Discount applied to: _____</p>
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<u>Office Use Only</u>	
Date Completed: _____	Whom: _____
Registration Deposit: _____	Balance: _____
Cash/Check #: _____	Cash/Check # _____
Tuition Paid: _____	Cash/Check # _____
Books Paid: _____	Cash/Check # _____