



**Tuition/Fees - Holy Family / Sacred Heart
2018 - 2019 School Year**

Parent/Guardian Responsible for Payment

Address _____ City _____ State _____ Zip _____

*ADD TUITION, FEES FOR EACH CHILD

1st Child	Name: _____	Grade: _____
	Tuition	\$3,180.00
	Fees	
	Total	

*Indicate amount from attached fees list (page 2)

2nd Child	Name: _____	Grade: _____
	Tuition	\$1,253.00
	Fees	
	Total	

*Indicate amount from attached fees list (page 2)

3rd Child	Name: _____	Grade: _____
	Tuition	\$637.00
	Fees	
	Total	

*Indicate amount from attached fees list (page 2)

4th Child	Name: _____	Grade: _____
	Tuition	\$637.00
	Fees	
	Total	

*Indicate amount from attached fees list (page 2)

5th Child	Name: _____	Grade: _____
	Tuition	\$637.00
	Fees	
	Total	

*Indicate amount from attached fees list (page 2)

Family Total	\$ _____
Less: SCRIP Credit	_____
Less: \$200 deposit	_____
Balance Due	\$ _____

Payment Frequency (select one)

- Annually - September 1st
- Semi-Annually - August 15 and January 15
- Monthly - August thru April on the 15th

Payment Method (select one)

- Electronic Transfer **For monthly payment option only*
15th of month **complete attached form*
- Check or Money Order

Parent/Guardian Signature _____ Date _____

Return this copy to school. Complete and keep page 2 for your records.

