

SECTION 5. TUITION PAYMENT OPTIONS (Please initial option you choose.)

We plan to participate by completing hours and fundraising. _____

We will not participate and will pay the No Parent Participation fee _____. (\$1200.00 will be added.)

SECTION 6. TUITION PAYMENT PLANS (Please choose one)

- ONE PAYMENT PLAN: All of your family tuition is paid directly to **FACTS** Tuition Management by August 1, 2017. Failure to pay by due date will result in a Late Fee.
- TWO PAYMENT PLAN: Your family tuition is paid directly to **FACTS** Tuition Management on August 1, 2017 with the balance paid by January 1, 2018.
- QUARTERLY PLAN: Your family tuition is paid directly to **FACTS** Tuition Management on August 1, 2017, November 1, 2017, February 1, 2018, and May 1, 2018.
- TEN PAYMENTS: Beginning August, 2017 and ending May, 2018, your family tuition is paid directly to **FACTS** Tuition Management.

SECTION 7. PARENTAL SUPPORT

- We will encourage and assist our students, teachers, and school community to foster a quality Catholic education.
- We accept Our Lady of Lourdes School’s program of faith formation and educational activities, designed to help children grow and develop as students and children of God.
- We accept our responsibility to pay tuition and fees and participate in the required school activities.
- We are willing to be part of the solution, should problems or concerns arise, and will work cooperatively to resolve them quickly.
- We have read the Parent and Student Handbook and will support the rules and regulations governing Our Lady of Lourdes School and follow the parent participation guidelines as outlined in the Handbook.

SECTION 8. I/We have read and understand this financial contract. I/we agree to the terms and requirements as stated herein and further understand that all supplied information will be held confidentially and not disclosed to third parties unless the financial commitment is not fulfilled.

_____The School reserves the right to withhold student records until all financial obligations have been settled.

Father/Guardian Signature

Social Security Number

Date

Mother/Guardian Signature

Social Security Number

Date

THIS IS TO CERTIFY THAT I HAVE READ AND APPROVED THE CONTENTS OF THIS CONTRACT.

Barbara Genera, Principal

Date