

AQUIN CATHOLIC PRESCHOOL
Tuition Contract 2010-2011

PARENT/GUARDIAN: Last Name: _____ First Name: _____
 FAMILY ADDRESS: Street: _____ City: _____ Zip: _____
 EMAIL ADDRESS: _____
 Religious Affiliation: _____ Affiliated Parish: _____

<u>PROGRAM</u>	<u>DAYS</u>	<u>TUITION</u>
5-DAY FULL TIME	M T W TH F	\$3,058
5-DAY PART TIME	M T W TH F	\$1,950
3-DAY FULL TIME	M W F	\$1,981
3-DAY PART TIME	M W F	\$1,170
2-DAY PART TIME	T TH	\$780

TUITION AMOUNTS FOR EACH CHILD

	Student 1	Student 2	Student 3
Name			
Program			
Amount			

TOTAL TUITION FOR ALL PRESCHOOL CHILDREN IN FAMILY. _____

FEES

Book/Specials (\$25)			
Milk 5-Day morning (\$24)			
Milk 5-Day full day (\$48)			
Milk 3-Day morning (\$15)			
Milk 3-Day full day (\$30)			
Milk 2-Day morning (\$10)			
Yearbook (\$20)			
Total			

Total Fees _____

TOTAL TUITION AND FEES _____

Minus \$50 Registration Fee _____

TOTAL AMOUNT DUE _____

PAYMENT (Check one)

_____ One payment of Total Amount Due by July 15, 2010 (2% tuition discount)

_____ 11 monthly payments of _____ payable by 15th of each month, July through May

Additional 4% charge with use of credit card.

Tuition is charged for each month (any day/s) the student is enrolled, July through May; ACS Policy 3240.3

Late fee: \$25 per month (payments not in office by 15th of the month)

Refund Policy: Any/all fees are nonrefundable; any overpaid tuition will be refunded

(divide total amount of tuition by each month child is registered, Aug. through May)

I have read and agree to abide by all the terms listed in this contract:

Signed _____

Date _____