

2019/2020 St. Mary of the Angels Fee Schedule

Family Name _____

Student(s) name _____

1. If you would like to include your family fee in your tuition contract please complete:

500.00 Per Family Fee _____

2. Parent/Scrip Participation- If you would like to buy out of your family participation hours or scrip purchases please complete, if not please skip to #3:

750.00 Participation Buy-Out _____

3. Education Contract:

6,064.00 Education of one student _____

4,233.00 Second student _____

2,730.00 Third student _____

2,426.00 Fourth student _____

Total Contract 2019/2020 (7/1/19-6/30/20) _____

Payment Schedule: (please circle one)

Preferred Payment Method:

Monthly
(Beginning 7/18)

Recurring Monthly Payment
MC/VISA

Quarterly
(July, Sept, Dec, Mar)

Check

Semi-Yearly
(July, December)

Yearly
(July)

Parent/Guardian Responsible for Tuition and other school charges: _____

Please Print

E-mail address for your monthly statements:

Email address

Please return this form to the office at your earliest convenience, your contract will follow.