



2016-2017 Tuition Contract

STUDENT(S)' FAMILY NAME _____ GRADE(S) _____
 PARENT'S NAME _____ PARENT'S SOCIAL SECURITY# _____
 HOME# _____ CELL# _____ Work# _____
 NAME AND ADDRESS OF PERSON RESPONSIBLE FOR BILL IF DIFFERENT FROM ABOVE:
 NAME _____
 ADDRESS _____
 SOCIAL SECURITY # _____ PHONE# _____

I understand and agree that as of the date of this contract I am obligated to pay all required fees and charges for the full academic year, as well as any late fees and legal or collection fees incurred. I understand that from this date I must give 30 days' notice (prior to the start of classes) of the intent not to return or forfeit tuition already paid. I acknowledge that this obligation is unconditional and that no portion of such fees paid or outstanding will be refunded or canceled in the event the above student should withdraw, be dismissed or be absent from school for any reason after the start of classes. I understand and agree to abide by all the policies of the school. I understand that no records will be released until my account has been paid in accordance with the agreed upon schedule. I understand that is my account is not kept current, my child may be dismissed from St. Pius X Classical Academy at the sole discretion of St. Pius X. I understand that St. Pius X's policy also refuses readmission to a student(s) whose family owes tuition from the previous year unless financial arrangements acceptable to St. Pius X Classical Academy have been made. I understand that failure to meet deadlines for the first tuition payment may result in the loss of a child's place in the school grade levels for which there is a waiting list.

2016-2017 Fees

	1 Child	2 Children	3 Children	4 Children
Catholic	\$5,477.00	\$9,167.00	\$12,778.00	\$12,978.00
Non-Catholic	\$6,077.00	\$10,242.00	\$14,277.00	\$14,477.00
Book Fee	\$100 per child			
Smart Tuition Registration	\$50			

Catholic Subsidy is not automatic. Each family may apply for subsidy within their parish and return a subsidy agreement form approved by their pastor.

PARISH NAME _____ AMOUNT GRANTED BY PASTOR \$ _____

TUITION ASSISTANCE FORMS ARE AVAILABLE AT THE OFFICE. 4% PRE PAY DISCOUNT AVAILABLE.

I recognize the fact that tuition does not cover the school's cost for educating my child. Therefore, I agree to also support the school by my involvement in its special fund raising projects throughout the year.

I acknowledge that I am the person(s) who is financially responsible for the above listed student and that I will be responsible for any failure to pay the appropriate fees and charges as they come due.

SIGNATURE _____ Date _____

(For office use) Accepted _____ Date _____