

**HOLY FAMILY SCHOOL
EARLY CHILDHOOD EDUCATION
Tuition Agreement Form**

Family Name _____

In consideration of the enrollment of my child/children:

Name _____ E.C.3/4 T/TH

as an early childhood student/students at Holy Family School, **I agree to pay the non-refundable registration fee of \$50.00 per child at the time of registration (to be applied to tuition)** and to make partial or full payment of the tuition according to the payment plan I have chosen below. After selecting one of the tuition payment plans, please confirm with your signature.

TUITION PAYMENT PLANS

Tuition (per child):

E.C. 3/4: \$685.00/year

_____ 1. **Semi-annual Payment Plan** (2 payments)

Partial tuition payment of \$_____, by September 12, 2008 and a signed agreement to pay the balance of \$_____ on the fifteenth day of January 2008.

_____ 2. **All at Once Plan** (1 payment)

Payment of tuition, \$_____, By September 12, 2008.

_____ 3. **Please add to my Monthly Direct Tuition Payment** as I have other children enrolled in grades K-8 at HFS.

Signature of Parent

Date