

NOTRE DAME PARISH SCHOOL

Tuition Contract

2019-2020

2165 S. Zenobia St, Denver, CO 80219

Phone: 303-935-3549

www.notredamedenver.org

Please complete both pages of Tuition Contract. Two signatures required on 2nd page.

Father's Name _____ (last, first, mi) _____ (please print)

Mother's Name _____ (last, first, mi) _____ (please print)

E-mail Address (please print) _____

Home Address: _____
City State Zip Code

Father's work # _____ Father's cell # _____

Mother's work # _____ Mother's cell # _____

Home phone # _____ **Parish** _____ Envelope # _____

I have fulfilled the stated requirements to be considered a parishioner. Should it be determined that these requirements are not met, I understand I will be required to pay the rate listed under "Other".

Child's Name _____ Gr. _____

Child's Name _____ Gr. _____

Child's Name _____ Gr. _____

Child's Name _____ Gr. _____

Consequences that may apply to late payments: If tuition payments are 30 school days late, the student will not be allowed to continue attending school until full payment is made or partial payment is made along with an approved payment plan for the balance.

Consequences that may apply to non-payment: Students will not be permitted to register at Notre Dame or another Catholic school within the Archdiocese of Denver until all financial obligations at their current or previous Catholic schools within the Archdiocese has been paid. Registration at the current school will not be accepted until all financial obligations have been met.

Contract cancellation/waiver: This contract may be cancelled or waived due to the following: transfer to another school, expulsion or student withdrawal. Parent/Guardian will remain responsible for any outstanding tuition payments and/or fees. Upon withdrawal or termination of the student's enrollment, tuition will be prorated to the last school day of the current month. A \$100 processing fee will be assessed for any revision to this Tuition Contract. Outstanding financial obligations will be sent to a collection agency.

I/We agree to abide by and comply with the terms and conditions stated in this Tuition Contract. We have had the contract explained and been provided the opportunity for questions. We understand this is a legal, binding and enforceable contract.

Both parents' signatures required on contract.

Father's signature _____ Date _____

Mother's Signature _____ Date _____

Person responsible for tuition payments if other than parents:

Print Name _____

Signature _____ Date _____

Your tuition PAYMENT

FACTS Number: _____

____ Annual **one** (1) payment of \$ _____ payment through FACTS due August 5, 2019

____ Semi-Annual **two** (2) payments of \$ _____ payments through FACTS due August 5, 2019 & January 5, 2020

____ Quarterly **four** (4) payments of \$ _____ payments due through FACTS the August 5, & November 5, February 5 and May 5th of 2020

____ Monthly **ten** (10) payments \$ _____ monthly payments due through FACTS on August 5th or the 20th, 2019 through May 5th or the 20th, 2020.

FOR OFFICE USE ONLY

Do not continue beyond this point.

TUITION

(K - 8) _____ students \$ _____

(K - 8) _____ students \$ _____

(Pre 3 & 4) _____ students \$ _____

Subtotal \$ _____

\$ _____

\$ _____

Total Tuition Due \$ _____

Registration Fee: \$220.00 Check _____
Cash _____
Credit Card _____

Business Manager _____ Date _____

Principal's signature _____ Date _____

Pastor's signature _____ Date _____