



A Pennsylvania Charitable Trust
110 Elmtree Road, New Kensington, PA 15068

TUITION PAYMENT AGREEMENT
Due July 10, 2017

Family Name _____

Total Tuition \$ _____

I/We agree to pay Mary Queen of Apostles School the tuition and all fees for the attendance of my/our child(ren) as established by the school for the 2017-2018 school year. A \$50 non-refundable registration fee is required at the time of registration. I/We elect to pay the tuition and costs as follows:

_____ One Payment due July 20, 2017

_____ Two Payments due July 20, 2017 and January 20, 2018

_____ Monthly payment plan on FACTS that will bring the balance to zero by June 30 or earlier of the school year completed in June.

_____ Any of the above options but paid through a credit card via the FACTS system (fee required). Please indicate which above option you are choosing.

_____ Combination of above options. Please indicate which options you are choosing and explain details:

I/We further agree that all payments will be paid when due. Should I/we be late in payment, I/we understand that the following process will be followed:

- a) The parents/guardians will be notified of any payment not received.
- b) The parents/guardians will be given 20 calendar days to bring the account to current status or meet with school administration to have an adjusted payment contract approved (not a guarantee).
- c) If the account is not brought to current status, and an adjusted payment contract is not agreed upon and approved by school administration, the student enrollment will cease at the end of the current quarter.

NO CASH PAYMENTS ARE ACCEPTED.

(Continued on back including signatures)

I/We agree to pay all amounts due under this contract. If another person is responsible to pay any part of the amount due for the child(ren) above, and she/he fails to pay when due, I/we agree to pay all amounts due immediately upon notification by the school.

I/We agree to pay for the entire semester if the child(ren) leave before that semester is completed.

I/We further agree to abide by the Mary Queen of Apostles School student-parent handbook and understand that if my/our child(ren) violates any portion of the student-parent handbook and/or is removed or expelled from Mary Queen of Apostles School for any reason consistent with the student-parent handbook, then I/we are not entitled to a proportionate refund of tuition. In addition, I/we understand that I/we may still be legally responsible for paying any tuition owed at the time our/my child(ren) stopped attending Mary Queen of Apostles School.

I/we further agree to be legally responsible for paying the tuition described above within the timeframes described above. I/We understand that Mary Queen of Apostles School may take any action available and consistent with applicable law in order to collect unpaid tuition owed by me/us including but not limited to withholding academic transcripts.

I/We have read and understood all of the terms and conditions contained in this agreement, and I/we agree to be legally bound by those terms and conditions.

Parent/Guardian 1 Date

Parent/Guardian 2 Date

Social Security Number

Social Security Number

Mailing Address

Mailing Address
(if different from parent/guardian 1)

Telephone

Telephone
(if different from parent/guardian 2)