

**FAMILY - ENROLLMENT CONTRACT 2017-2018--PLEASE RETURN WITH REGISTRATION FEE
OR \$175 PER FAMILY OF 2 OR MORE CHILDREN.**

This agreement is made between St. Ambrose School and me, the undersigned parent, guardian or other party responsible for the payment of all tuition charges.

Parent, Guardian or Responsible Party Name

Contact Phone Number, Address & Email

Students Entering Full Day PRE-K:

Name:
Name:

Grade in 2017-2018

Current Tuition

\$6,800
4,800
3,400

Students Entering Kindergarten:

Name:
Name:

Grade in 2017-2018

Tuition

\$5,750

Students entering Grades 1-8:

Name:
Name:
Name:
Name:

Grade in 2017-2018

Tuition

\$5,250
9275
12370
15500

I agree to pay the total tuition charge of:

PRE-K \$
Kindergarten \$
Grades 1-8 \$
Total \$

I will remit the tuition payment as follows: (please check one option)
Payment to be made in full no later than August 1, 2017 through FACTS
Ten Payments to be made through FACTS beginning August 2017

Please be advised this contract holds a spot for your child.
There will be no refunds for vacations taken during the school year.

I am applying for financial aid in the amount of \$ _____. I understand that I will be notified if I am eligible in June.
Until notified, I understand the tuition is the full tuition amount.

It is the tuition policy of the Albany Diocesan School Board to prohibit a student from entering class on the opening day of school if tuition payments are not current in accordance with the enrollment contract.

Parent/Guardian Signature _____

Date _____

Principal Signature _____

Date _____

Registration fee of \$100 per child or \$175 per family is due at time of registration.

Paid Date _____