

# Bishop Kelly High School

# Return

## Tuition Contract for Academic Year 2009-2010

STUDENT NAME: \_\_\_\_\_ 2010 2011 2012 2013

Please Circle Graduation Year

PERSON(S) RESPONSIBLE FOR BILL: \_\_\_\_\_

(Please indicate if the bill is to be split between two parties, and complete additional information on the back of this form.)

BILLING ADDRESS: \_\_\_\_\_

It is the responsibility of the parent to update this address.

TELEPHONE: HOME \_\_\_\_\_ WORK \_\_\_\_\_ CELL \_\_\_\_\_

BILLING E-MAIL: \_\_\_\_\_ (your statement will be sent via email)

Name of supporting Parish to be invoiced for your tuition support: \_\_\_\_\_

The supporting pastors will verify your registration and participation in their parish before approving your tuition support payment to BK.

Actual Cost - \$8000 F.E & International Tuition Rate	Tuition - \$6500	Tuition with Parish Support - \$5700
<p>If you are able, please partner with us and meet the cost of educating your child.</p> <p>All payments above your eligible tuition amount will be processed as a charitable tax donation of either \$2,300 with support or \$1,500.</p>	<p>Regular Tuition rate if you are not eligible for tuition support from a parish.</p>	<p>To qualify, you must be a registered and a participating member of one of the following parishes <b>before June 30, 2009</b>: St. John's, St. Mark's, Sacred Heart, Holy Apostles', St. Mary's (Boise), Risen Christ, or Our Lady of the Rosary.</p> <p>If the pastor does not grant approval, the tuition shall be the \$6,500.00 regular tuition rate.</p>

1. I am eligible for the following tuition rate: (Please circle one)      \$8000      \$6500      \$5700

2.  I am eligible for tiered tuition

Names of students attending BK (oldest to youngest)	Grade	Discount
		No Discount
		10% Discount
		20% Discount
		30% Discount
		40% Discount

3. I will make **tuition** payments according to the following schedule:

(Please check one)

10 Months: (mandatory EFT or CC payment applies) August 2009 – May 2010

Semi-Annual: due July 1, 2009 & December 1, 2009

One Payment: due August 1, 2009

4.  I/we want to be Parent Partners and help to meet the cost to educate:

\$2300 (full cost with Parish support)       \$1500 (full cost at non supported rate)

\$750       \$500       other amount \$ \_\_\_\_\_

Process Parents as Partners payment as a tax deductible donation:

With tuition       Enclosed is my payment for \$ \_\_\_\_\_

5.  I would like to Partner but am unable to participate in the Parents as Partners program at this time.

I will also pay for Student Fees. I understand that all fees will be paid in full by July 1, 2009. I understand and agree that if the parish does not award approval for the tuition support that I am responsible for the regular tuition rate. I am liable for all additional charges during the academic year. Terms: NET 10<sup>th</sup> of month. I understand and agree that payment for all charges is due and payable in full the 10<sup>th</sup> of each month. Failure to pay in prescribed period may result in loss of credit privileges and shall accrue interest at the rate of 1.5% per month. I (we) declare that the information provided is true and complete.

Signature of Parent/Guardian (financially responsible)

Date

**\*\*This page is to be used for those families needing tuition billed between two parties.**

PERSON(S) RESPONSIBLE FOR BILL: \_\_\_\_\_

BILLING ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

It is the responsibility of the parent to update this address.

TELEPHONE: HOME \_\_\_\_\_ WORK \_\_\_\_\_ CELL \_\_\_\_\_

BILLING E-MAIL: \_\_\_\_\_ (your statement will be sent via email)

**Name of supporting Parish to be invoiced for your tuition support:** \_\_\_\_\_

*The supporting pastors will verify your registration and participation in their parish before approving your tuition support payment to BK.*

.....

Please complete the following.

\_\_\_\_\_ Tuition and Fees are to split equally between both parties.

Tuition and Fees are to be split according to the following schedule;

	I	II
<b>Name</b>		
<b>Tuition</b>	\$	\$
<b>Fees</b>	\$	\$
<b>Additional Charges</b>	%	%

.....

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\_\_\_\_\_  
Signature of Parent/Guardian (financially responsible)

\_\_\_\_\_  
Date