St. Margaret Mary Catholic Community Tuition Agreement/Authorization Form

I agree and authorize tuition payments for the 2017-2018 school year according to the rate and schedule below. I understand and agree that upon signing this contract the full year's tuition shall be considered payable and nonrefundable.

Below is the authorization form which gives our financial institution authority to withdraw your payment from your account. **Avoided check for verification of your bank account information must be attached.** All tuition payments will be taken out on the 15th of each month.

		ary Church to initiate do s for any debit entries in	ebit entries and to initiate, if n error to my (our)
☐ Checking	Account	☐ Savings Account	(Select One)
I (we) would like to i	nitiate debit entries	: July 15, 2017	through April 15, 2018
STUDENT(S) NAM	E & GRADE		
Please Check Approp	priate Tuition Rate	to be Withdrawn:	
 \$550/month (1Child) = total \$5,500 total \$840/month (2 Children) = total \$8,400 total \$960/month (3 Children or more) = \$9,600 total 			
Non-Catholic Famil	<u>y:</u>	\$800/month (Per Chile	d) x = total
received written not	tification from me afford St. Marga	(or either of us) of its	St. Margaret Mary Church has s termination in such time and in inancial institution a reasonable
NAME (S)			
	(Please Print)		
DATE	SIGNED X		
	SIGNED X		