

St. Gregory Parish School  
 140 West Main Street, North East, PA 16428  
 (814) 725-4571

Inv _____
Pd _____

**Preschool & PreKindergarten Financial Agreement - School Year 2020-2021**

**MORNING (M & F) (8:45 am-12:00 pm) and AFTERNOON PROGRAM (T, W, TH) (8:45 am-3:00 pm)**

**Date of Admission:** \_\_\_\_\_ **Date of Withdrawal/Graduation:** \_\_\_\_\_

Parent/Guardian Last Name: _____	First Name: _____
Parent/Guardian Last Name: _____	First Name: _____
Child resides with: _____ parents _____ mother only _____ father only _____ guardian	
Child's Address: _____	
Billing Address: _____	
Email Address: _____	St. Gregory Parishioner: Y/N Other: _____
Phone Number: _____	Cell Number _____
<b>Name of Child:</b> _____	<b>Date of Birth:</b> _____

**Fee Amount AM & PM Program**  
**M, F (8:45 am-12:00 pm), T,W,TH (8:45 am-3:00 pm)**

<b>\$50 <u>Non-Refundable</u> Registration Fee</b>	<b><u>Date Paid:</u> _____</b>	<b><u>Check #</u> _____</b>	<b><u>or Cash</u></b>
<b><u>Tuition Rates</u></b>	<b><u>10 Monthly Payment</u></b>	<b><u>4 Quarterly Payment</u></b>	
	<i>(August-May)</i>	<i>(Aug/Nov/Jan/March)</i>	
<b>\$3,350.00</b>	<b>\$335.00</b>	<b>\$837.50</b>	

Our tuition rates remain the same regardless of attendance and are based on 3.25 hours of instructional time on Monday and Fridays (8:45 a.m. until 12:00 p.m.) and 6.25 hours of instructional time on Tuesday, Wednesday and Thursday (12:30 p.m.-3:00 p.m.) per the established school year calendar.

**Total Tuition Due: \$ \_\_\_\_\_ Monthly/Quarterly Payment Amount \$ \_\_\_\_\_**

**Initial Payment Plan Choice (see back):**

**A (full payment to school) \_\_\_\_\_ B (monthly FACTS Enrollment) \_\_\_\_\_ C (credit card through FACTS)**

**Payment Options**

All families shall be expected to make tuition payments according to one of the following payment plans. Each family's preferred manner of payment must be submitted each year at the time of student registration. Options for payment shall include:

**A. Full Payment** - Under this plan the entire amount of tuition is paid on **or before July 10<sup>th</sup>**. This payment is made directly to the school office. With this plan, the registration fee will be waived. A fee of \$30.00 will be assessed for any returned checks for one-time payments only.

**B. Monthly/Quarterly Payments** – Beginning in August through the **FACTS Tuition Management Plan**. This plan is an automatic payment plan made through your checking or statement savings account. Those choosing this plan will authorize their financial institution to make automatic monthly payments to FACTS on the date you select each month/quarter. There is a fee of \$42.00 for 3 or more payments and \$10.00 for 2 payments.

The FACTS tuition payment processing plan offers quick and easy online enrollment, hassle-free automated payments, an array of payment dates during the month to fit your budget, simple account accessibility and all information that you provide is safe and completely confidential. The enrollment process required just a few minutes of your time and very little information.

**To enroll**, please go to: <https://online.factsmgt.com/Tmg/pubic/AgreementSignup.aspx?t=3HGXN>. After completion, our bookkeeper, will take care of the remainder of the process. Enrollment is mandatory and the first of ten payments should be scheduled for August (unless late enrollment). You will receive confirmation once your agreement has been finalized. Please contact our bookkeeper with any questions or concerns regarding your tuition related matters at [bookkeeping@stgregs.net](mailto:bookkeeping@stgregs.net).

C. **Credit Card Payments** – Payments may be made with MasterCard/Visa or Discover through the FACTS program. The credit card fee is 2.75% regardless of how many payments are made.

**Extra services to be provided at an additional fee if applicable**

\*Pizza on Tuesdays and Hot Lunch on Fridays are available through the Elementary School and order forms will come home with your child or may be picked up in the school office. \*\*Must be pre-ordered.

\*Milk is served with snack and lunch – order forms and applications for the free milk program will be sent home with your child. (A note is required if child is not to receive milk)

**Agreement Acknowledgement: *new form must be signed and dated each school year***

I hereby acknowledge as the parent or guardian of the child listed above that I have received complete written program information at the time of enrollment and that I have read and understand the terms of this Financial Agreement and the Billing process. I also agree to update the emergency contact/parental consent form information whenever changes occur or every 6 months at a minimum.

I hereby comply by signing below:

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Guardian Please Print Name: \_\_\_\_\_

Signature of School Representative: \_\_\_\_\_ Date: \_\_\_\_\_

**This information is important and must be completed in case of emergency:** Person(s) designated by parent to whom child may be released, including phone number:

1.	Phone #
2.	Phone #
3.	Phone #
4.	Phone #
5.	Phone #
6.	Phone #