ST. MATTHIAS SCHOOL
2019-2020 FINANCIAL AGREEMENT PreK – 8TH

Family Name______________________Family#_____ Parents’ Names_______________________________________

Telephone Number_____________________________ Email______________________________________________

Children’s names and grades
________________________________________________________________________________________

I.  TUITION RATE ELIGIBILITY: Please review and initial one of the sections below:

1.   PARTICIPATING PARISHIONER:

_____ We are a registered family at St. Matthias.  **We participate regularly in the weekly celebration of the Eucharist and have made a minimum annual contribution of $1000 during the 2018 calendar year.**

_____ We are a registered Roman Catholic family at a parish other than St. Matthias.  **A letter from our pastor stating that we are participating parishioners is attached.**

2.   NON-PARTICIPATING PARISHIONER/NON-PARISHIONER:

_____ We are a Catholic family who is not registered at any parish.  *If you join St. Matthias, you will be eligible for the Parishioner rate in 2020-2021, provided you meet the criteria for Participating Parishioner.**

_____ We are registered parishioners who did not meet the criteria for a Participating Parishioner.

_____ We are a Non-Catholic Family.

II.  TUITION CALCULATION -

       From the tuition rate sheet, based on above eligibility
       ___________________ ___________________
       Nonrefundable payments due with this form:
       FEES / DEPOSIT (check payable to SMS)
       New registration $500 per student   OR   Re-registration 10% DEPOSIT
       HSA DUES-per family (check payable to SMSHSA) $45.00

III.  HSA FUNDRAISING COMMITMENT:

       After any roll over fundraising credit earned in 2018-2019 the remaining balance will be paid:
       _____ in a check by May 31, 2019  _____ added to my FACTS payment

IV.   VOLUNTEER HOUR COMMITMENT - Please initial BOTH statements to acknowledge acceptance

       _____ I understand my family must volunteer a minimum of 2 hours for HSA fundraisers and/or Special events during the 2019-2020 academic year.

       _____ I understand my family must work a minimum of 2 hours at the St. Matthias Parish Carnival

V.    CHOOSE A PAYMENT PLAN FOR BALANCE:

       _____ PAYMENT IN FULL BY MAY 31, 2019  _____ PAYMENT THROUGH FACTS MANAGEMENT CO.

VI.   WITHDRAWAL POLICY:

       Upon student(s) withdrawal, the following tuition amounts will be DUE*:

       before 6/30 10%  between 7/1 and 8/31 20%  between 9/1 and 10/31 30%
       between 11/1 and 12/31 50%  between 1/1 and 3/31 70%  after 3/31 100%

By signing this agreement, I acknowledge my financial responsibility for the balance of tuition due and agree to the terms of the withdrawal policy.

Parent Signature  Date  Parent Name (please print)  Parent Signature  Date  Parent Name (please print)