**Holy Family School – Learning for today, preparing for tomorrow.**

2606 Carpenter Rd SE • Lacey, WA 98503 • 360-491-7060 • holyfamilylacey.com

Mailing address: PO Box 3700 • Lacey, WA 98509

**2021-2022 Tuition Agreement Contract**

Name(s) of Child / Children: Grade in 2021-2022

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I/We agree to all of the following for the 2021-2022 school year: Initial each section.

\_\_\_\_\_ To pay the full **non-refundable** registration fee (per child/family) prior to the start of school.

\_\_\_\_\_ Contract Term: To be responsible for a full semester’s tuition upon the student having begun the term, with the exception

of military transfers or extreme life/financial circumstances as approved by the school principal.

(Note: First Semester = September thru January; Second Semester = February thru June).

Payment Options: To pay the tuition for my student(s) prior to the 15th of each month, beginning with Sept. 15th, 2021.

\_\_\_\_\_ Direct Payment: Cash/check to school office. Debit or credit card payments will add 2.95% fee.

\_\_\_\_\_ Automatic Online Payment: Enroll in the FACTS Management/SchoolAdmin payment plan.

\_\_\_\_\_ I understand I will need to provide a suitable $100 donation to the Auction. Providing a $100 item donated by a business I

have contacted is acceptable.

\_\_\_\_\_ I understand that if I don’t provide a $100 item to the auction, by purchasing or procuring, there will be a $100

charge to my account in lieu of a donation.

\_\_\_\_\_ I plan on fulfilling my family volunteer commitment hour obligation.

\_\_\_\_\_ I understand my account will be billed $35 for each commitment hour not fulfilled by June, 2022.

\_\_\_\_\_ I have read through and will abide by the Parent-Student Handbook: www.holyfamilylacey.org

Tuition: Registration:

2021-2022 $\_\_\_\_\_\_\_\_\_\_(Sept.-June) 2021-2022 $\_\_\_\_\_\_\_/year

I/We understand that my/our student(s) cannot be assured enrollment unless any outstanding 2020-2021 tuition, fees and all registration fees for the 2021-2022 school year are paid in full by July 1, 2021. I/We understand and agree to comply in full with the provisions of this tuition agreement contract.

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Guardian/Father (Print Name) Signature Date

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Guardian/Mother (Print Name) Signature Date

Person Responsible For Payment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Name Relationship

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Address (if different than parent) City State Zip

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Home Phone Number (if different than parent) Day/Work Phone Number