



# 2019-2020 ENROLLMENT CONTRACT

The terms of this contract govern your student(s) enrollment at St. Edward School. Before signing this contract, please read the terms of this agreement on the back.

<b>Registration Paid</b>
Amt Pd _____
Check # _____
Date _____

Name of Student(s) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Grade (for 2019-2020) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**PERSON(S) RESPONSIBLE FOR PAYMENT OF ACCOUNT**

Name \_\_\_\_\_

Address \_\_\_\_\_

Home phone \_\_\_\_\_ Cell phone \_\_\_\_\_ Work phone \_\_\_\_\_

Email address \_\_\_\_\_

Check here if address is the same as student

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Total Cost per Year to Educate a Student at St. Edward School: \$8,500**

**Tuition Option 1**  
 We believe that Catholic education should be affordable for everyone, which is why we set the tuition cost lower than the actual cost. To make up the difference, we obtain grants, scholarships, parish subsidies, archdiocesan support and other funding. We ask that you prayerfully consider paying the full cost of your child's education of **\$8,500**. **If you choose this option, you automatically fulfill your fundraising requirement of \$600 and pay no registration fee.**

**Tuition Option 2** **Ask about our multiple child discount.**

Tuition Cost:	<b>\$5,300 in parish rate per child</b>	<b>\$6,000 out of parish/non-Catholic rate per child</b>
Registration/Instructional Materials Fee:	<b>\$300 non-refundable per student</b>	<b>\$300 non-refundable per student</b>

**FACTS Tuition Management fees per family payment options: \$43 (10 payments), \$10 (two payments by August/January, \$0 (Payment in-full)). If a family pays the full tuition listed above by August 10th, they will receive a 3% discount. If the family receives any subsidy, they are not entitled to the 3% discount.**

**Tuition assistance is available based on family income and number of children enrolled. To receive tuition assistance, a family must  provide the following information.**

Fulcrum Foundation Tuition Assistance Form completed and submitted (if returning family)

3 current pay stubs for all wage earners

2018 income tax returns and W-2's

\_\_\_\_\_ (Principal's signature that these documents have been received)

**Yearly** \_\_\_\_\_

**Monthly** \_\_\_\_\_

\_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ Date \_\_\_\_\_

Signature of person responsible for payment

Signature of principal

**TERMS OF THIS CONTRACT**

This agreement governs the terms of your child’s enrollment at St. Edward Catholic School. **Please read before signing and return this copy to the school. A copy will be returned to you.**

I/We understand and agree to promptly pay all tuition, instructional fees, semester service hour balances and year-end fundraising balances.

I/We understand that tuition fees are spread 10 months. Once you are enrolled in FACTS Management, payment options are available. FACTS Tuition Management fees per family payment options: \$43 (10 payments), \$10 (two payments by August/January, \$0 (Payment in-full)). If a family pays the full tuition listed above by August 10th, they will receive a 3% discount. If the family receives any subsidy, they are not entitled to the 3% discount.

I/We understand that students stay at home when financial commitments have not been paid by the end of each month.

I/We understand and agree to give a minimum of 40 hours of service to St. Edward School/Parish per year or pay a \$15.00 fee per each service hour not completed. This fee will be billed to me/us per trimester.

I/We understand that registration in a parish which subsidizes St. Edward School is required to obtain subsidized status. Registration assumes active participation and financial commitment to that Church.

I/We understand and agree that each family is required to participate in school sponsored fundraising events and to raise a certain amount in net profits as determined by the Parent Association. If I/we do not raise that determined amount I/we understand and agree to pay that difference by May 15.

I/We understand that my/our name, address and phone number will be given to the Parent Association. I/we are required to actively participate in the activities of the Parent Association and school programs as long as my/our child(ren) are enrolled at St. Edward School.

I/We give permission for my/our child(ren’s) photographs to appear in publicity shots and marketing materials for St. Edward School.

I/We understand and agree that rudeness and disrespect for school personnel can cause my child to lose the privilege of receiving an education at St. Edward Catholic School.

I/We understand that families enter on a one trimester probationary status.

**TITLE I**

The guidelines for the Title 1 Program (language and math lab) have been changed. The amount of services provided to schools is now based on those students qualifying for free or reduced lunch, regardless of whether the school has a hot lunch program or not. In order for St. Edward School to continue to receive Title 1 services it is necessary to know the total number of families that qualify according to income. Please see the chart that follows and fill out the areas requested.

**INCOME CHART**

Look at the chart. Find the household size. HOUSEHOLD is: ALL persons, including parents, children, grandparents and all people unrelated who live in your home and share living expenses. Find the total household income. TOTAL HOUSEHOLD INCOME is: The income each household member received last month before taxes. This includes wages, social security, pension, unemployment, welfare, child support, alimony, and any other cash income. In certain cases, foster children are eligible for free and reduced price meals regardless of household income.

**FEDERAL INCOME CHART**

Family Size	Year	Month	Week
1	\$22,459	\$1,872	\$432
2	\$30,451	\$2,538	\$586
3	\$38,443	\$3,204	\$740
4	\$46,435	\$3,870	\$893
5	\$54,427	\$4,536	\$1,047
6	\$62,419	\$5,202	\$1,201
7	\$70,411	\$5,868	\$1,355
8	\$78,403	\$6,534	\$1,508
Each additional member add:	\$7,992	\$666	\$154

**PROOF OF ELIGIBILITY**

The information you provide may be checked at any time. You may be asked to send information to verify your child’s eligibility for Title 1 services at your child’s school.

Parent/Guardian’s Signature \_\_\_\_\_

Date \_\_\_\_\_

**Yes, I do qualify**       **No, I do not qualify**