

ST. CECILIA SCHOOL
TUITION PAYMENT AGREEMENT FORM

(RETURN FORM TO ST. CECILIA SCHOOL)

1. STUDENT INFORMATION

Enter student names and grade attending in 2021-2022 on the line provided

First _____ Last _____ Grade _____ First _____ Last _____ Grade _____

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2. RESPONSIBLE FOR PAYMENT (Must be an authorized signer on the account listed in Section 3)

Name _____ Daytime Phone # _____

Address _____ Evening Phone # _____

City _____ State _____ Zip _____

3. PAYMENT TERMS (Circle a Payment Option)

OPTION 1: One Payment in Full – I will pay the total balance due in full to St. Cecilia School by Aug 2, 2021

Attach cash, check or money order for full amount.

OPTION 2: Schedule Payment Plan – I will use the payment plan to pay the total balance due with automatic deductions from my bank account on the _____ 5th or the _____ 20th of every month. (Please check your choice.)

Bank Name _____ City _____ State _____

_____ Checking or _____ Savings

Bank Account Number _____ Banking Routing number _____

(Attach to this form a voided check)

This authorization is to remain in full force and effect until June 30, 2022 or until the School has received written notification from me of its termination in such time and in such manner as to afford both a reasonable opportunity to act on it.

IMPORTANT – A \$25 Missed Payment Fee will be automatically deducted from this account for each 2nd payment attempt that is missed.

4. SIGNATURE

Name (Print) _____ Signature _____ Date _____

Name (Print) _____ Signature _____ Date _____

(If second signature is required)

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THIS SPACE FOR OFFICE USE ONLY

Number of students _____

In Parish

Out of Parish

Bank Routing # (ABA#) _____

Tuition/Fees Amount \$ _____

Less Registration \$ _____

Less Tuition Aid \$ _____

Total Balance due \$ _____

Number of Payments _____

Amt. of each Payment \$ _____

Tuition paid \$ _____

Date _____

Check # _____ Copy mailed _____