

TUITION AGREEMENT

2019-2020 ACADEMIC YEAR

**COMPLETE BOTH SIDES AND
RETURN BY
MAY 10, 2019**

(CONTACT INFORMATION)

Student Name _____

Student Number - _____

Parent (Guardian) Name _____

Address _____

Telephone # (home) _____ (cell) _____

TUITION PAYMENT PLAN

Check one of the following tuition options. Tuition and fee statements will be mailed on June 13, 2019.

- [] Option 1: One payment of \$14,325.00 due July 1, 2019. **
- [] Option 2: Three equal payments of \$4,845.00 to be paid on July 1, 2019, November 1, 2019 and February 3, 2020. The total tuition under this option is \$14,535.00. **
- [] Option 3: Ten monthly payments of \$1,472.50 each, beginning July 2019 and concluding April 2020. The total tuition under this option is \$14,725.00. Payments under this option must be made through ACH payments coming out of your account on either the 5th or 20th of each month. (Complete the enclosed green Automatic Tuition Payment Agreement and return with a \$50.00 processing fee). **

** Note: The tuition amounts listed above do not include the following:

- \$275.00 iPad technology fee billed each year to all students
- \$40.00 Freshman P.E. uniform fee
- \$150.00 Senior graduation fee

Any financial aid awarded will be deducted from the tuition listed above, and the balance will be due in accordance with the option chosen. If, subsequent to signing this agreement, you pay according to an option other than the one you have chosen, you will be responsible for the tuition rate according to the actual payment schedule chosen.

COLLECTION AND REFUND POLICIES

Tuition is due according to the payment plan selected above. Past due tuition accounts will be assessed a 1% late fee each month. Tuition payments under option 1 or option 2 may be made in cash or by personal check and mailed or otherwise delivered to the Business Office. Make all checks payable to Saint Xavier High School. Tuition payments made under Option 3 will be automatically deducted on a monthly basis from your checking or savings account. (Please complete the enclosed green Automatic Tuition Payment Agreement).

The school reserves the right to request payment in cash or a certified check when payment is being made on a delinquent account and/or if the school receives a personal check that does not clear the bank. A student with a delinquent tuition account is not entitled to attend classes, sit for semester and final examinations or participate in school related activities. Accordingly, the school cannot issue a report card, transcript or diploma until course work is completed when the delinquent tuition is paid. All tuition charges also must be paid and up to date if a student wishes to receive a class ring or attend the senior prom.

Should a student leave St. X for any reason, you will be responsible for tuition according to the following:

- 25% from first day of school through September 30th,
- 50% from October 1st through November 30th,
- 75% from December 1st through January 31st,
- Responsible for 100% of tuition after January 31st.

OVER – PLEASE COMPLETE OTHER SIDE

PARENT/STUDENT AGREEMENT

We (I) understand that, as a private Catholic school, Saint Xavier High School is extending the privilege of its formational and educational programs to our (my) son (ward). In signing this Tuition Agreement, we (I) agree and our (my) son agrees that he will comply with the philosophy, the values, the codes and regulations expected of all students at Saint Xavier High School as found in the Student/Parent Handbook. We (I) further recognize the right of the school to exclude at any time a student whose attitude, behavior or academic performance does not reflect the expectations outlined in the Student/Parent Handbook. We, (I) approve and endorse this Tuition Agreement for our (my) son (ward) and in consideration of his enrollment as a student at Saint Xavier High School, we (I) hereby guarantee to Saint Xavier High School the payment of his tuition and fees and such other expenses as he may incur in his account with the school. We (I) agree to payment of his tuition and fees and such other expenses as he may incur in his account with the school. We (I) agree to pay interest on past due amounts equal to 1% per month or the maximum interest rate permitted by applicable law, whichever is less. If any particular billing is not paid when due, we (I) agree to pay in addition to the foregoing: all collection costs relating to this account if referred for collection, or if suit is brought to collect this account, we (I) agree to pay all court costs and reasonable attorney’s fees. We (I) further recognize the right of the school, in accordance with its financial policies as contained in the Student/Parent Handbook and promulgated by the Board of Directors, to exclude our (my) son from classes if his account is not current and to withhold final exams, grade reports, and/or transcripts of a student whose account is not paid.

_____ **Responsible for _____% of tuition**
Signature of Father/Male Guardian

Printed Name _____ Date _____

Billing Address _____

Phone Number _____ Cell _____

_____ **Responsible for _____% of tuition**
Signature of Mother/Female Guardian

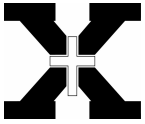
Printed Name _____ Date _____

Billing Address _____

Phone Number _____ Cell _____

IF TUITION IS SHARED, EACH RESPONSIBLE PARTY MUST COMPLETE A TUITION AGREEMENT.

THIS AGREEMENT MUST BE RETURNED TO THE BUSINESS OFFICE NO LATER THAN MAY 09, 2019



AUTOMATIC TUITION PAYMENT AGREEMENT

Saint Xavier High School
1609 Poplar Level Rd
Louisville, Kentucky 40217
502-634-2130

*****A Non-refundable enrollment fee of \$50.00 (check or money order) must accompany this form. Agreement will not be processed until \$50.00 payment is received.**

1. Person(s) Responsible for Payment

(MUST be authorized signer on account listed in Section 2)

Name _____
Address _____
City/State/Zip _____
Contact # _____ Cell _____

Student - _____

ID # - _____

2. Payment Method

*****ATTACH A VOIDED CHECK AND THE \$50.00 FEE*****

Auto Bank Payment
(ACH)

Checking _____ or Savings _____

Bank Name _____

Bank Routing # _____

Account # _____

For checking account, attach a voided check not a deposit slip.

For savings account, provide correct routing & savings account numbers.

3. Payment Information

Payment Date Check One

5th _____ or 20th _____ of each month **July – April**

*****Section below will be completed in the business office and a copy returned for your records*****

A \$25.00 NSF returned payment fee will be added to your tuition account for each returned payment.

Should a payment from the 5th of the month be returned it will be reattempted on the 20th of the same month.
If payment is returned on the 20th of the month, it will be reattempted on the 5th of the following month.

Total Balance Due _____

Number of Payments _____

Amount of each payment _____

Authorization:

Signature required by the person who is an authorized signer on the account listed in Section 2.

By signing this Agreement, I guarantee that I am an authorized signer on the account provided; I hereby agree to be the Responsible Party. I hereby accept, and agree to be bound by, the terms and conditions contained within this Agreement.

Signature of the person who is an authorized signer on the account listed in Section 2

Print name of person who signed

Date

Larry Bergamini
Vice President of Finance-St. Xavier High School