

MCS Financial Agreement for School Year 2008-2009

To be kept on file in the MCS Business Office as a record of financial obligation for tuition payments.

PLEASE CHECK ONE OF THE FOLLOWING

____ Full Payment to be made by August 10. Please fill out * items only, then sign and date at the bottom of the form.

____ 11 Monthly Payments with 1st payment due by August 10. Please fill out entire form.

Person financially responsible for payment of tuition:

*Last Name _____ *First _____ M.I. _____

*Relationship to student _____

Social Security # or Driver's License # _____

Billing address _____ City _____ State _____ Zip _____

Phone # _____

*E-mail Address (for Account Statements and other pertinent information) _____

Place of employment _____ Phone # _____

Employer Address _____

Additional Person financially responsible for payment of tuition:

Last Name _____ First _____ M.I. _____

Relationship to student _____

Social Security # or Driver's License # _____

Billing address _____ City _____ State _____ Zip _____

Phone # _____

Place of employment _____ Phone # _____

Employer Address _____

**Name and grade of student/s attending:*

1. _____ Grade _____ 3. _____ Grade _____

2. _____ Grade _____ 4. _____ Grade _____

Financial Policies

- The total tuition for the year is divided into **11 monthly payments** for your convenience. A detailed invoice will be sent out August 1st regarding fees and tuition. You will be given a booklet of return envelopes to be used monthly. Statements will be sent out quarterly.
- **The first tuition payment and all fees are due by August 10th. The last tuition payment is due by June 10th. Students enrolling after the 10th must pay the first month's tuition payment before the first day of school.**
- Tuition for **Senior graduates and Kindergarten graduates must be paid in full prior to the graduation date** in order for students to participate in the graduation ceremonies.
- There will be a **\$25.00** late fee on any unpaid tuition balance per month (after the 15th).
- There will be a **\$25.00** fee charged for any NSF (non-sufficient funds) checks returned by the bank.
- Per policy of the MCS School Board, **students will be withheld from classes if their tuition account is more than 60 days past due.**

**I am in agreement with the above policies and procedures and will take full financial responsibility of this account.
All information is believed to be accurate as stated.**

Signature _____ Date _____

Signature _____ Date _____