



Name: _____

2018-2019 Grade: _____

ENTER TO LEARN CHRIST ✝ LEAVE TO SERVE CHRIST

425 PARK AVENUE | ABBEVILLE, LA 70510

P | 337.893.6636 • F | 337.898.0394 • W | VERMILIONCATHOLIC.COM

FINANCIAL OBLIGATION FORM 2018-2019

REGISTRATION, OUT OF PARISH, AND BUILDING/MAINTENANCE FEES ARE NON-REFUNDABLE

<u>REGISTRATION FEE PER CHILD:</u>	ON or BEFORE February 9, 2018	\$465.00
	ON or AFTER February 9, 2018	\$565.00

REGISTRATION FEE IS DUE AT THE TIME OF REGISTRATION. For a student to be considered registered, parents must submit a deposit of at least \$200.00 per student with this Financial Obligation form. **Forms submitted without a deposit are incomplete and the student is not considered registered. Registration balances are due in full no later than April 16, 2018.** Students who have not paid the registration fee or at least the deposit will not be allowed to schedule classes for the 2018-2019 school year.

OUT OF CHURCH PARISH/ NON CATHOLIC FEE PER CHILD: Due August 17, 2018 **\$250.00**

Family's Church Parish: _____
(Please complete – DO NOT LEAVE BLANK)

A family must be REGISTERED AND SUPPORTING of the Church Parish. Some identifiable contribution, either use of Church Support Envelopes which are offered to all parishioners on Church Census, or use of personal check which is regularly posted by the church office.

All Non-St. Mary Magdalen families will be assessed the fee for each child in attendance. An Out-Of-Parish Fee Commitment form is included in this packet for families who wish to request coverage of this fee by their church parish. Sometimes, your pastor may be willing to cover this fee. It must be completed, signed by the church's pastor and submitted for the school bookkeeper to request payment of the fee by the church parish. This fee will be assessed for each student whose commitment form is not completed and signed by their church's pastor.

BUILDING/MAINTENANCE FEE PER FAMILY: Due August 17, 2018 **\$100.00**

<u>TUITION PER STUDENT</u>	\$6,500.00
<u>TUITION PER ADDITIONAL SIBLINGS IN HOUSEHOLD</u>	\$6,450.00

Please reference and complete the tuition payment agreement form on the reverse side to choose a payment plan for tuition.

Parent Signature: _____ Date: _____

Vermilion Catholic High School does not discriminate on the basis of race, creed, national origin or ethnic background in educational programs or activities.



For Office Use Only:
Date Rec'd _____
C/Check # _____
Amount _____



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TUITION PER STUDENT **\$6,500.00**
TUITION PER ADDITIONAL SIBLINGS IN HOUSEHOLD **\$6,450.00**

Payment Options:

- ___ Option 1 I will pay tuition in full on or before August 17, 2018 and receive a discount of \$100.
- ___ Option 2 Please draft tuition from my bank account for 10 months beginning in August, 2018 and ending in May, 2019 for 1/10th of tuition \$650 per month (\$645 per month for additional siblings in household). (Attach voided check and choose draft date.)
- ___ Option 3 Please draft tuition from my bank account for 12 months beginning in June, 2018 and ending in May, 2019 for 1/12th of tuition \$541.67 per month (\$537.50 per month for additional siblings in household). (Attach voided check and choose draft date.)

CIRCLE DAY OF BANK DRAFT: 1ST 10TH 15TH

I HEREBY AUTHORIZE VERMILION CATHOLIC HIGH SCHOOL TO DRAFT TUITION FROM MY BANK ACCOUNT EACH MONTH ACCORDING TO THE OPTION SELECTED.

Parent/Guardian's Name(s): _____

Parent/Guardian's Email: _____

Parent/Guardian's Signature: _____ Date: _____

**ATTACH VOIDED CHECK HERE.
 REQUIRED FOR ALL DRAFT PAYMENT OPTIONS**

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NON-ST. MARY MAGDALEN FEE COMMITMENT

This form is required by all families outside of Saint Mary Magdalen Church parish

To: Fellow Pastors

From: Father Louis Richard

RE: Out-of-Parish Fee Commitment

Vermilion Catholic High School assesses an out-of-parish fee to those students who are not registered parishioners of Saint Mary Magdalen Church Parish. It is at your discretion as to whether you will assist your parishioners with all or part of this fee for students in your parish. The following family has indicated that they are parishioners of your church parish. Please complete the following information regarding this family.

TO BE COMPLETED BY THE FAMILY:

Father's Name: _____
Mother's Name: _____
Student's Name: _____
Student's Name: _____
Student's Name: _____

Religion: _____
Religion: _____
Grade Level: _____
Grade Level: _____
Grade Level: _____

Address: _____

Phone: _____
Home _____ Cell _____ Work _____

TO BE COMPLETED BY THE PASTOR:

Church Parish: _____ City: _____

In reference to the family listed above, I will commit to covering

- _____ All of the \$250.00 Out-of-Parish Fee
- _____ A portion of the Out-of-Parish Fee Amount that will be covered \$ _____
- _____ None of the Out-of-Parish Fee

PASTOR'S SIGNATURE: _____ Parish Seal

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C/Check # _____
Amount _____