



VERMILION CATHOLIC HIGH SCHOOL

425 Park Avenue † Abbeville, Louisiana 70510
337.893.6636 † www.vermilioncatholic.com

Name: _____

2017-2018 Grade: _____

FINANCIAL OBLIGATION FORM 2017-2018

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

REGISTRATION FEE PER CHILD: ON or BEFORE February 10, 2017 **\$465.00**
ON or AFTER February 11, 2017 **\$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 15, 2017. Students who have not paid the registration fee or at least the deposit will not be allowed to schedule classes for the 2017-2018 school year.

OUT OF CHURCH PARISH/ NON CATHOLIC FEE PER CHILD: Due August 15, 2017 **\$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 15, 2017 **\$100.00**

TUITION PER STUDENT **\$6,350.00**
TUITION PER ADDITIONAL SIBLINGS IN HOUSEHOLD **\$6,300.00**

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.

ENTER TO LEARN CHRIST † LEAVE TO SERVE CHRIST



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



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Name: _____
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TUITION PER STUDENT

\$6,350.00

TUITION PER ADDITIONAL SIBLINGS IN HOUSEHOLD

\$6,300.00

Payment Options:

- ___ Option 1 I will pay tuition in full on or before August 15, 2017 and receive a discount of \$100.
- ___ Option 2 Please draft tuition from my bank account for 10 months beginning in August, 2017 and ending in May, 2018 for 1/10th of tuition \$635 per month (\$630 per month for additional siblings in household). (Attach check and choose draft date.)
- ___ Option 3 Please draft tuition from my bank account for 12 months beginning in June, 2017 and ending in May, 2017 for 1/12th of tuition \$529.17 per month (\$525.00 per month for additional siblings in household). (Attach 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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