



TUITION AGREEMENT

This form must be completed and signed by a parent/guardian with students attending Central Catholic High School in the 2024-2025 school year. This must be submitted before enrollment can be completed.

Student Name _____	Grade for 2024/2025 _____
_____	_____
_____	_____
_____	_____

Parent/Guardian Name _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Parish _____

Parent/Guardian Email _____

To qualify for the parochial school discount, please list all siblings attending St. Michael's, St. Vincent de Paul , Corpus Christi or Our Lady of Peace. Please include the name and their grades for the 24/25 school year.

Do you intend to apply for financial assistance (TAP)? Yes ___ No ___.

Are you currently receiving HOPE Scholarship Funds? Yes ___ No ___.

If eligible, do you plan to apply? Yes ___ No ___.

Tuition Rates are found on the accompanying sheet 2024-2025 TUITION and can be paid by (choose ONE):

_____ Option 1 Payment in Full: Using check, cash or credit card, families can pay their tuition in full, payable to CCHS by July 31, 2024 and receive a 3% tuition discount.

_____ Option 2: Monthly payments (11) beginning August 2024 FACTS. Automatic bank withdrawals through your checking or savings account may be made on either the 5th or 20th of each month. *A \$40 annual FACTS Enrollment Fee will be assessed when enrollment is completed. The website to set up your banking information, if you are not enrolled, is on the CCHS website.

I agree to make tuition payments for the 2024-2025 school year according to one of the options above. I have read the Tuition Policy & Procedure Form and agree to abide by the conditions therein.

Parent Signature _____ Date _____

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