

**FINANCIAL REGISTRATION FORM FOR NEW FAMILIES
PRE-KINDERGARTEN – GRADE 8**

2008/2009

HOLY FAMILY CATHOLIC SCHOOL ♦ 5129 S. APOPKA-VINELAND RD. ♦ ORLANDO, FL 32819 ♦ TEL (407) 876-9344 ♦ WWW.HFCATHOLIC.SCHOOL.FL

Family Name: Mr. & Mrs. Mr. Mrs. Ms _____

Address: _____

City _____ State _____

Responsible Party _____

***We no longer offer
the FACTS Program
at Holy Family Catholic School***

Total Fees _____ (attach check to registration form)

SEE CHART ON BACK FOR TUITION RATES →

Student Name (please print)	08/09 Grade	Tuition Amount
_____	_____	# of children _____
_____	_____	X
_____	_____	Tuition rate _____
_____	_____	Total tuition= _____
_____	_____	

Please indicate your tuition payment choice:

- Option 1: Entire tuition paid by May 1, 2008 - will receive a 3% discount
- Option 2: Half of tuition paid by May 1, 2008 and remainder by October 1, 2008 – no discount
- Option 3: Payments through the FACTS program (Fast Automatic Cash Transfer System which offers parents various options to suit individual needs. These payments begin July, 2008 and end April, 2009.) Check one of the following:
 - “paperless” FACTS renewal – no changes necessary.
 - renew FACTS but make changes as noted on the back of this form.
 - first time user – FACTS application form will be forwarded with tuition statement.

Please note that partial tuition for students transferring during the school year will be pro-rated to the actual number of days the students have attended or will attend (excluding absences). If withdrawn, a non-refundable amount of \$200 per child for cost of workbooks and processing will be retained.

Families needing financial assistance must submit a written request for application to the principal in a sealed envelope at the time of re-registration. Forms must be completed and mailed to FACTS no later than April 1, 2008. Requests for assistance received after this date are unable to be honored.

Your signature indicates your acceptance and obligation to the tuition amount and payment schedule outlined above.

Signature of “person responsible” for payment of tuition _____

Printed Name of “person responsible” for payment of tuition _____

Date _____

Office use only

Date Application Fee Received _____

Amount Paid _____

Check No. _____

Bookkeeper _____