

**MDO TUITION PAYMENT AGREEMENT 2020/2021**  
**ONE FORM PER FAMILY**

Student \_\_\_\_\_ Student \_\_\_\_\_ Student \_\_\_\_\_

**OUR FAMILY ( ) IS / OUR FAMILY ( ) IS NOT A MEMBER OF CTK PARISH**  
MEMBERSHIP WILL BE VERIFIED THROUGH PARISH REGISTRATION

**Registration into the Nursery program and annual facility fees must be verified before accepting this application**

- 1) The student(s) listed above ("student") has registered for enrollment in the MDO for the current school year.
- 2) At the time of registering, a **non-refundable** registration fee of \$120 is due for each student.
- 3) At the Open House (August), the parent/guardian agrees to pay the annual tuition which is based per child.

The annual tuition is payable by one of the following methods:

I agree to pay tuition **ANNUALLY**, payable in full at Open House in the amount of **\$1890**

I agree to tuition in **NINE MONTHLY INSTALLMENTS** of **\$210**, which shall be due and payable by pre-authorized bank drafts on the 10<sup>th</sup> of each month beginning in September and concluding in May, of the current school year. I also agree to pay any bank charges (\$20) imposed for insufficient funds in the account.

- 4) It is understood that, upon the student(s) attendance in September, the obligation to pay the annual tuition is for the FULL SCHOOL YEAR. No portion paid or outstanding will be refunded or canceled except upon proof of job relocation or other good cause shown. In all other cases of absence, withdrawal, or dismissal, the MDO reserves the right to settle, compromise, or waive a student(s) annual tuition obligation in such a manner as it shall deem advisable in its sole discretion.
- 5) The undersigned parent or guardian agrees to abide by the rules and regulations of the MDO as found in the Parent Handbook or published elsewhere, which rules and regulations are deemed a material part of this agreement.

A copy of this financial agreement is the only receipt you will be given.  
Please contact the finance department to request statements or yearly contributions paid

**- - A voided check or deposit slip must be included with this agreement if paying monthly - -**

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home phone: \_\_\_\_\_ Work phone: \_\_\_\_\_ Cell: \_\_\_\_\_