

Payment Plan Request Form

We are requesting a payment plan for the current school term year for our Faith Formation and/or Sacrament Preparation total tuition cost for our household.

Family Name: _____ **Date of request:** _____

Faith Formation Program: (Circle) CGS ENCT

Sacramental Prep Program: (Circle) EUCH CONF Year 1 CONF Year 2

Resgistration		Late Fee after July
1 Child	\$250	\$50
2 Children	\$380	
3+Children	\$460	

Sacrament Fees: Firt Eucharist \$55 or Confirmation: \$200.00(per child)

Faith Formation Total Cost: \$ _____
Sacrament Prep Total Cost: \$ _____
Total Family Tuition Cost: \$ _____
Deposit @ Registration? Y / N Less (-) \$ _____

Grant \$ or Discount %: (if applicable) Less (-) \$ _____

Total Amount Due: \$ _____

We agree to make monthly payments for the remaining balance of the faith formation tuition until the balance is paid in full. As long as a payment plan has been set-up in advance, and monthly payments are made by the **1st of each month**, no late fees will be added to the account. We understand that all tuition payments need to be **paid in full no later December 1, of the current school term** for our child/children to remain in the faith formation program or sacrament preparation. The Payment Commitment we plan to use to pay our family's remaining balance in full, prior to completion of a sacrament or faith formation program, will be:

Payment Plan Commitment:
 \$ _____ (Amount of mo. payment) we will pay by **the 1st of each month** starting Aug. 1, of the current school term x _____ (# of months)
All tuition balances will be paid in full by December 1, of the current school term.
Failure to uphold payment plan agreement will result in being dropped from formation.

Signature: _____ **Date:** _____
Phone #: _____ **E-mail Address:** _____

Office Use Only Payment Plan: Approved: _____ Date: _____ Declined: : _____