

DUCHESNE HIGH SCHOOL

2018-2019 TUITION PAYMENT PREFERENCE FORM



Please fill out and return this form and return to the school office by April 15, 2018.

Financial aid and scholarship awardees will be notified in May. Only one form is needed per family. Thank you.

PARENT / GUARDIAN'S NAME: _____

ADDRESS: _____

CITY/STATE/ZIP: _____ HOME PHONE: _____

(CIRCLE ONE FOR 2018-2019 YEAR)

STUDENT'S NAME: _____

CLASS: 9 10 11 12

STUDENT'S NAME: _____

CLASS: 9 10 11 12

STUDENT'S NAME: _____

CLASS: 9 10 11 12

TUITION PAYMENT INTENTION: (Please check one option)

At this time our family will be paying tuition by the following option. (Parent/Guardian's do not have to use the same option for each child. Indicate the option choice for each child.)

_____ **OPTION 1** - Single payment due by July 15, 2018. **\$150 discount given.**

_____ **OPTION 2** - Two payment plan (July 15 and December 15, 2018) **\$50 discount deducted on 2nd payment.**

_____ **OPTION 3** - Four equal payments (July 15 & Oct. 15, 2018, Jan. 15 & April 15 2019) **No discount given.**

_____ **OPTION 4** - FACTS monthly payment plan budgets over 10 months from July, 2018 through April, 2019.

Please indicate which payment date you prefer: _____ 5th of the month

_____ 20th of the month (If one is not checked, we will select the 20th of the month for payment)

Visit our website, duchesne-hs.org/tuition for on-line instructions to enroll in the FACTS program. There is a \$43 fee per family. *Credit Cards may be used for tuition payments with a handling fee of 2.75% added.* Please feel free to contact Roseann Ogden at (636) 757-6911 if you have any questions.

I agree to make tuition payments for the 2018-2019 school year according to one of the options above.

(Parent Signature)

(Date)

(Parent Signature)

(Date)

By signing below, you agree to make a contribution to the Pioneer Fund by paying an additional amount towards the full cost of \$13,900 to educate your student. Any donation above the standard tuition and fees will benefit our families that struggle to make the Duchesne experience a reality for their children and your donation will be tax deductible. Please indicate your amount below.

\$ _____
(Amount)

(Parent Signature)