

**St Mary's Parish School
Elementary Campus
35 Bartlett Street
Westfield, MA 01085-3000
Telephone 568-2388 Fax 568-7460
stmsaints.org**

FAMILY LAST NAME _____

PARENT FIRST NAME _____

ADDRESS _____

TELEPHONE NUMBER _____

CHILD'S NAME _____ **GRADE ENTERING**

_____ Pre K

Our child will attend St. Mary's Pre K for five days _____

Tuition for five days is \$ 5,150.00

We will be paying our tuition for the 2015-2016 school year in the following manner;

_____ **Pre-pay in full (on or before August 20, 2015 can deduct \$50)**

_____ **Two installments (due August 20, 2015 & January 20, 2016)**

_____ **Ten installments paid due on the 20th of the month. First payment due July 20, 2015**

Registration fee: \$200

The registration fee of \$200 will be deducted from the tuition (registration fee is non-refundable)

Parent/Guardian Signature

In registering our child, I (we) agree to meet the financial and service commitments outlined. Further, I (we) agree to abide by the guidelines established in the school handbook and recognize that failure to do so could result in dismissal.

If your family recruits a new student for the fall of 2015 you will receive a \$200 tuition credit for your family. (limit one per family)