

Registration 2020-2021 School Year

_____ My child(ren) will be attending Sacred Heart of Jesus School for the 2020-2021 school year. (Please include any child(ren) who will be entering our Pre-Kindergarten or Kindergarten program for the 2020-2021 school year.)

Name of Child	2020-2021 Grade	Name of Child	2020-2021 Grade
_____	_____	_____	_____
_____	_____	_____	_____

CHECK ANY THAT APPLY:

- _____ Applying for EdChoice or Jon Peterson Scholarship from the State of Ohio. (Please circle) Parents are responsible for obtaining funds and signing over to the school.

- _____ Applying for Parish Tuition Assistance (TAP). Further information, including family financial information, must be provided in order to determine eligibility, and you will be contacted with details.

- _____ Applying for Diocesan Tuition Assistance. Must apply through the Diocese of Cleveland.

- _____ Applying for Parish Scholarship/Financial Aid.

I understand that enrollment is conditioned on my completing and signing the attached tuition payment agreement and recurring payment authorization (where applicable), and is subject to the terms and conditions of the tuition payment agreement. I understand that applying for a scholarship does not guarantee that I will receive it.

Parent / Guardian Name _____ Phone # _____ Email _____

Address _____

Signature _____ Date _____

_____ My child(ren) **will not be** returning to Sacred Heart of Jesus School
2020-2021 school year.

Please share your reasons with us:

Name _____

Signature _____ Date _____

If you have any questions please call Jeff Flaherty at the parish center at (330) 336-3049 or email: JEFF@SHOFJESUS.COM

2020-2021 TUITION PAYMENT PLAN AND AGREEMENT

Name(s) of Person Responsible for Tuition Payments:

Last Name	First Name	Relationship
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Last Name	First Name	Relationship
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I agree to pay Sacred Heart of Jesus Parish School the tuition and all fees listed above for the attendance of my child(ren) as established by the school for the 2020-2021 school year, less any applicable scholarships and financial aid for which I apply, qualify, and actually receive, subject to the terms and conditions of this Agreement.

Tuition Payment Plan

Please mark preferred payment method(s) for the 2020-2021 school year:

Payment Option	Payment Type	Payment Guidelines and Due Date
	One Full Payment by cash or check	Make checks payable to Sacred Heart of Jesus Parish. Full payment is due by July 1 for, 2020. A 3% discount will be applied.
	10 Monthly Recurring Payments	10 monthly payments beginning September 15, 2020 and ending on June 15, 2021. Complete attached Recurring Payment Authorization. *This is the only option for EdChoice Scholarship recipients.
	12 Monthly Recurring Payments	12 monthly payments beginning July 1, 2020, and ending on June 1, 2021. Complete attached Recurring Payment Authorization.

ADDITIONAL TERMS AND CONDITIONS

1. I agree to cooperate with the school and to ensure that the funds from all scholarships and financial aid that I receive from outside sources to cover tuition and/or fees are transferred to the school, and that I will be responsible for these amounts if such funds are not transferred to the school for any reason.
2. I understand and agree that, regardless of what preferred payment option is selected, I am personally responsible for the payments and for ensuring that the tuition and fees are paid in full. I further agree that all payments owed under this Agreement will be paid by the due date corresponding to the payment method(s) selected above. Should I be late in making any payment, I understand that I and the other parents/guardians (if they are not me), will be notified of any payment not received.
3. Any family with an unpaid Tuition and/or Fees balance for the current School Year will not be allowed to register for the following School Year and School records, diplomas or transcripts will not be released until the current year's Tuition and fees are paid, unless special arrangements have been made in writing and signed by Parish pastor.
4. Prepaid Tuition will only be refunded in full if written notice of cancellation is received by the School before the first day that classes for the School year are scheduled to start.
5. Once the School year begins, Tuition refunds are made based on the number of school days remaining until the end of the school year.
6. The Student(s) and Student's parents/guardians agree that they and their child(ren)/ward(s) will abide by the policies and guidelines as stated in the School handbook.

7. I understand that the School will not reserve a place for my child(ren) for the upcoming school year until after I have returned a completed and signed Tuition Agreement. I further understand that my child's/children's eligibility for enrollment is conditioned upon (1) his/her/ successful completion of the current School Year; (2) unless special arrangements have been made with the Parish pastor, full payment of all Tuition owed for the current and/or prior School Years; and (3) acceptance by the school. I understand that the School reserves the right to deny admission or enrollment for any lawful reason.

By signing below, I agree that I have read and understand all of the terms and conditions contained in this agreement, and I agree to be personally bound by those terms and conditions.

_____ Parent/Guardian 1	_____ Date	_____ Parent/Guardian 2	_____ Date
_____ Print Name		_____ Print Name	
_____ Email Address		_____ Email Address (if different from (Parent/Guardian 1)	
_____ Telephone		_____ Telephone (if different from Parent/Guardian 1)	

RECURRING PAYMENT AUTHORIZATION / AGREEMENT

By completing this form, I authorize regularly scheduled charges to my account designated below. I understand that I will be charged the amount(s) indicated below. A receipt for each payment will be provided and I understand that the charge will appear on my account statement. I agree that no prior-notification for charges will be provided by the school unless the date or amount changes, in which case I will receive notice from the school at least 10 days prior to the payment being collected.

I _____ authorize Sacred Heart of Jesus Parish School to charge my account indicated below, in accordance with the Tuition Payment Agreement, as follows:

___ 10 monthly payments beginning September 15, 2020 and ending on June 15, 2021.

___ 12 monthly payments beginning July 1, 2020, and ending on June 1, 2021.

Name on Account _____ Checking _____ Savings _____

Bank Routing Number: _____

Bank Account Number: _____

****Please attach a
voided check***

I have read and understand and agree to the above-written statements, terms, and conditions: RETAIN A COPY OF THIS FORM FOR YOUR RECORDS.

My Name (Printed): _____

My Name (Signed): _____

Date: _____