

Student Payment Agreement

2023-24 School Year



A SETON CATHOLIC SCHOOL

Student Full Name:	
Date of Birth (MM/DD/YYYY):	Grade for 2023-24:
I agree to fulfill the requirements of one of the following payment plans for my child (check one):	
<input type="checkbox"/> Pay tuition in full by the first day of school. Non-refundable tuition deposit: \$ _____ due by _____	
<input type="checkbox"/> Pay tuition in installments beginning July 1, 2023. Installment type: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly Non-refundable tuition deposit: \$ _____ due by _____	
<input type="checkbox"/> Complete an application and submit required documentation for one of the following*: <input type="checkbox"/> Milwaukee Parental Choice Program (MPCP) <input type="checkbox"/> Wisconsin Parental Choice Program (WPCP) <input type="checkbox"/> Special Needs Scholarship Program (SNSP)	
*I understand if my student does not get accepted into the choice program, a payment agreement will be required to cover the cost of tuition.	

We are proud to provide a quality Catholic education for our students. We look forward to your child(ren) joining our school family. By signing below, you are agreeing to comply with the school's policies and procedures outlined in the Student/Family handbook.

We aim to serve as many children as possible. There may still be waiting lists for admission in certain grades and at certain times of the year. You will receive notification from our school on your official acceptance when documentation has been submitted and a seat is confirmed to be available for your child.

Parent/Guardian Acknowledgement	
Printed Name	Date
Signature	

OFFICE USE ONLY Date received: _____ Received by: _____ Student status: <input type="checkbox"/> Returning student <input type="checkbox"/> New student Enrollment program: <input type="checkbox"/> Tuition <input type="checkbox"/> Financial assistance/scholarship <input type="checkbox"/> Waiver <input type="checkbox"/> Choice
