POWERS CATHOLIC HIGH SCHOOL
STUDENT REGISTRATION/TUITION OPTIONS
2020-2021

Students must be registered annually. This process involves the scheduling of classes and the payment of a **non-refundable** registration fee. The registration fee is **$100 for the first student** and a maximum of **$150 per family** for a school year. Please make check payable to ***Powers Catholic High School***. This fee is due by June 25, 2020, if not paid by this date the fee will be added to your August invoice.

STUDENT INFORMATION

STUDENT NAME (S) ***GRADE FOR 2020-2021***

_____ ____

_____ ____

_____ ____

2020-2021 variable tuition rate ranges between $5300-$9411 based on each family's circumstances

PARENT INFORMATION

☐ ***check box if parent info is to be used for billing, if not, please complete billing info***

Parent Name: _____ ***Billing name***: _____

Address _____ ***Billing address***: _____

City/Zip: _____ ***Billing City/Zip***: _____

E-mail: _____ ***Billing E-mail***: _____

Home ph#:_____ ***Cell ph#***_____ ***Billing Home ph#*** _____***Cell ph#*** _____

Catholic parish name: _____ ***Catholic parish name***: _____
(must be registered to receive parishioner rate) (must be registered to receive parishioner rate)

SELECT A PAYMENT METHOD

*****Tuition is paid over 12 months (June-May) unless you currently are on a customized payment plan***

☐ I intend to pay tuition in full by June 5, 2020 ***(registration fee will be waived, do not pay if you are paying in full)***
☐ I agree to make my payments on a monthly basis by the **5th** of each month. (June-May)
☐ I authorize PCHS to automatically debit my payments on the **15th** of each payment month (June-May) from the below provided bank account:

PLEASE DEBIT MY: ☐ **CHECKING** (please attach a voided check if possible) or ☐ **SAVINGS**

9 Digit Routing Number **Bank Account Number**

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****** In addition to tuition, all families are expected to support the annual Powers Catholic raffle and are responsible for the cost of allotted raffle tickets.***

This form MUST be signed and dated by the financially responsible party
***** By signing below you are agreeing to all terms and conditions related to education expenses and tuition costs.***

_____ _____ $ _____
Financially responsible parent/guardian signature **Date** ***Amount enclosed***

CONFIDENTIAL