

2012-2013 YEAR TUITION CONTRACT

*Saints Peter & Paul Catholic School – Business Office
3900 Pierce St. Wheat Ridge, CO 80033 303-424-3706*

Father's Name Home Phone Mother's Name Home Phone

Billing Address City St Zip

Person(s) responsible for Tuition (if other than parents)

Name Relationship to Student Home Phone

Address City St Zip

REGISTRATION FEE (Non Refundable with completed registration PACKET & fee)
By March 12, 2012 – \$150.00 Early Registration After March 12, 2012 – \$175.00 Due at Registration

Circle all tuition rates that may apply below TUITION RATES FOR THE 2012-2013 SCHOOL YEAR

<u>Pre School (One Rate)</u>					
	<i>Pre-K Half Day- 2 Day</i>	<i>\$1,285.00</i>		<i>Pre-K Full Day- 2 Day</i>	<i>\$2,025.00</i>
	<i>Pre-K Half Day- 3 Day</i>	<i>\$1,720.00</i>		<i>Pre-K Full Day- 3 Day</i>	<i>\$3,035.00</i>
	<i>Pre-K Half Day- 4 Day</i>	<i>\$2,110.00</i>		<i>Pre-K Full Day- 4 Day</i>	<i>\$4,050.00</i>
	<i>Pre-K Half Day- 5 Day</i>	<i>\$2,630.00</i>		<i>Pre-K Full Day- 5 Day</i>	<i>\$5,050.00</i>
<hr/>					
<u>K thru 8</u>	<i>Active Parishioners Archdiocese of Denver (signed form required)</i>	<i>Not-Active Parishioners Non-Catholic Families</i>			
<i>Half Day K</i>	<i>\$2,170.00</i>	<i>\$ 2,815.00</i>			
<i>Full Day K</i>	<i>\$3,950.00</i>	<i>\$5,115.00</i>			<i>*Discount allowed for FULL TIME students only K-8</i>
<i>Grades 1-8</i>					
<i>1 Child</i>	<i>\$3,950.00</i>	<i>\$5,115.00</i>			
<i>*2 Children</i>	<i>\$7,900.00</i>	<i>\$10,230.00</i>			<i>*If more than 4 children, deduct 30% off the single child tuition rate</i>
<i>*3 Children</i>	<i>\$11,060.00</i>	<i>\$14,323.00</i>			
<i>*4 Children</i>	<i>\$13,825.00</i>	<i>\$17,903.00</i>			

Please note: The Active Parishioner rate may only be claimed for grades K-8 if you have a signed "Active Parishioner Form" signed by the pastor of your parish PARISH: _____ (ATTACH Signed Form)

STUDENTS to be Enrolled	Being Enrolled in Grade	Tuition-completed by the business office
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

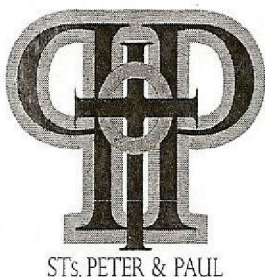
I/We will pay tuition in the following manner (check one)

- FULL Payment on or before August 6, 2012 less 2% discount**
(Does not apply if receiving PSAS or other Grants/Discounts). If the deadline passes this discount is removed, MONTHLY PAYMENTS begin immediately. AUGUST payment is DUE. Complete ACH form for the remaining 9 months.
- 10 MONTHLY Payments, using ACH (Automatic Tuition Payment NWUFCU) beginning August 2012.**
Deduct from my check/savings account on the 5th [] or 20th []. Final payment May 2013. (Attach completed ACH form with a void-check or deposit slip. The person who signs the form must be an authorized signer on the bank account).

Note: If for any reason your monthly payment cannot be made through ACH, there may be a \$25.00/month charge each month the Parish Business Office must facilitate the billing. For changes to a payment cycle, there may be a \$25.00 fee before a new payment cycle is processed.

This agreement indicates understanding that this is a binding financial agreement and contract. Final tuition amount is determined by Sts Peter & Paul School Tuition Policy and any Grants and/or PSAS recommendations.

Signature Print Name Date (Rev 02/12)



Saints Peter and Paul Catholic Church

3900 Pierce Street
Wheat Ridge, CO 80033
Phone: 303-424-3706
Fax: 303-424-0819

TUITION POLICY

Revised 02/12

Payment Plans:

1. PRE-PAYMENT is due August 6th 2012. A 2% discount will be given if the total tuition due is paid-in-full by this date. **There will be no exceptions.** This pre-payment must be made directly to the parish office. Such payment can only be cash, money order, cashiers check or personal check. Credit cards are not accepted. (NSF checks will be charged a \$25.00 processing fee)
2. MONTHLY PAYMENTS must be made through NWUFCU (North West United Federal Credit Union) by ACH. If you are unable to set up an account through NWUFCU, or NWUFCU is unable to collect your monthly payment, there will be a \$25.00 service charge for each month the business office becomes involved in the payment process.

Delinquent Payments:

1. Payments not received thirty (30) days after the due date are considered delinquent.
2. Once the account is delinquent, a letter will be sent to the parent(s) giving notification. They must contact and give a written plan to the Principal or Parish Business Manager within one week of the post mark of the letter presenting a written plan of action on how and when payment will be forthcoming.
3. If the account becomes sixty (60) days delinquent, a second letter will be sent to the parent(s) requesting a scheduled **mandatory** meeting with members of the Finance Council to determine the best course of action to be taken to resolve this delinquency. If not resolved subsequent to the meeting, the Finance Council reserves the right to suspend student(s) from enrollment.
4. A family with a delinquent account will be denied registration for the next school year until the delinquent account is paid-in-full. Any family, who has lost "current status" due to a delinquent account, will have to follow "new family" registration procedures.
5. If a family with a **child in the 8th** grade has a delinquent tuition account, the tuition account must be paid-in-full by the first week of May, such student(s) will be denied participation in the cotillion and graduation activities.
6. If the family has **any** past due accounts owed to the school or if all required fees are not paid the child's name will not be placed on a class list at the beginning of the school year.

The Finance Council reserves the right to send a delinquent account to a collection agency for payment at the parent's expense. A family sent to a collection agency may not enroll or return to Sts. Peter and Paul's school.



STs. PETER & PAUL



AUTHORIZATION AGREEMENT FOR PREAUTHORIZED PAYMENTS

NAME(S) _____ ACCOUNT # _____

I (we) hereby authorize Northwest United Federal Credit Union, hereinafter called COMPANY, to initiate debit entries and to initiate, if necessary, credit entries and adjustments for any debit entries in error to my (our) () checking () savings account (select one) indicated below and the depository named below, hereinafter, called DEPOSITORY, to credit and/or debit the same to such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. Law.

DEPOSITORY NAME _____ BRANCH _____

CITY _____ STATE _____ ZIP _____

TRANSIT/ABA # _____ ACCOUNT # _____

****ATTACH VOIDED CHECK TO THIS FORM****

DEBIT FROM: () SAVINGS-Attach only a bank letter or specification sheet. Deposit tickets not accepted.

() CHECKING-Attach only a void check, bank letter, or specification sheet. Deposit tickets not accepted.

PAYMENT DATE: _____ 5TH _____ 20th

PAYMENT TERMS: **To be completed by the business office**

Month/Year of FIRST Payment

_____/_____/_____ Total Balance Due: \$ _____.

Number of Payments: _____ Amount of Each Payment: \$ _____.

PLEASE INITIAL FOR ACKNOWLEDGEMENT OF THE FOLLOWING ITEMS:

_____ \$6.00 ANNUAL SERVICE FEE TO BE DEBITED WITH THE FIRST PAYMENT

_____ Any funds will be directly credited to our outstanding balance with Sts. Peter & Paul School for tuition.

_____ Receipt of the Electronic Funds Disclosure.

This authority is to remain in full force and effect until COMPANY has received written notification from me (or either of us) of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it.

DATE _____ SIGNATURE _____

Signature of the person who is an authorized signer on the account

Saints Peter & Paul Catholic Church **Electronic Funds Transfer (EFT) Disclosure**

I. EFT Transactions are:

- A. Preauthorized debit transactions through an Automated Clearing House Association (hereafter referred to as ACH)*
- B. Transactions involving the transfer of funds from one account to another account (at least one of the accounts is not owned, either individually or jointly, by the persons requesting the transfer).*

II. Fees Any changes to the information in this Agreement are made by contacting Saints Peter and Paul in accordance with our policy. As a result of the changes authorized by you, the total balance due may change and/or payment amount will change. Payments continue until the total balance due is paid-in-full.

If for any reason your monthly payment cannot be made through ACH, there may be a \$25.00/month charge each month the Parish Business Office must facilitate the billing. For changes to a payment cycle, there may be a \$25.00 fee before a new payment cycle is processed.

If there is an ACH stop payment or return item, there may be a \$25.00 fee.

If your financial institution returns a payment because of Non-Sufficient Funds, a \$25.00 Returned Payment Fee may be charged.

III. Your Liability for Unauthorized Transactions

If you discover an error, report the error immediately. This will provide a timely response to letters, e-mails or phone calls. It is your responsibility to report suspected errors as soon as possible.

IV. Right to Stop Payment and Procedure to Stop Payment

A. Stop Payments apply only to preauthorized debits/credits through the ACH program and we must receive your request three (3) business days before your payment is scheduled.

You can stop a scheduled payment by:

- Calling us at: 303-424-3706 X 23 Business Manager (you may be required to put your request in writing)*
- Or write us at: Saints Peter & Paul Catholic Church, 3900 Pierce Street, Wheat Ridge, Co. 80033*

As noted above, there may be a \$25.00 fee for each stop payment order you give.

B. Notice of varying amounts

If your scheduled payment amount changes, the new payment amount will take effect the next month following the change and for the remaining number of payments.

C. Liability for failure to stop payment of preauthorized transfer

The request for stop payment must be received 3 business days or more before the transfer is scheduled. Failure to complete a transfer in a timely manner or the transfer of an incorrect amount according to our agreement, we will be liable for your losses or damages. However, note these exceptions:

- a. If, through no fault of ours, you do not have sufficient funds in your account to make the transfer.*
- b. If the system was not working properly...*
- c. If circumstances beyond our control (such as fire or flood) prevent the transfer, despite reasonable precautions that we have taken.*
- d. For any other reasonable exceptions.*

V. Business Days (Payment Dates)

For purposes of these disclosures, our business days are Monday through Friday. Holidays are not included. If the payment date falls on a weekend or a banking holiday observed by the Federal Reserve, the payment will be attempted on the next business day. Although Saints Peter and Paul specifies the date that each payment will be withdrawn, your financial institution determines the time-of-day the payment is debited to the account.

VI. Confidentiality (Privacy & Security)

We will not disclose information to third parties about you or the transfers you make, unless:

- 1. It is necessary for completing transfers*
- 2. In order to verify the existence of your account*
- 3. In order to comply with government agency or court orders*
- 4. You give us your written permission*



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STs. PETER & PAUL

ACTIVE Archdiocese of Denver PARISHIONERS STS PETER & PAUL Parishioners FORM School Year 2012-2013

All are welcome to join the parish family of Sts Peter & Paul! We are a STEWARDSHIP community who acknowledges that all we have and are, comes from God. In a spirit of praise and gratitude, we return our time, talent and treasure to the Lord.

Parent's Names

Phone

Envelope #

Address

City/St

Zip

*In order to qualify as an ACTIVE parishioner of Sts Peter & Paul Parish with regard to a Modified tuition rate, the family MUST fulfill ALL four criteria (Archdiocesan Policy 5100), sign and return this form **BEFORE April 16, 2012** (March 12, 2012, for Early Registration Applicants) to anticipate the Modified tuition rate, the PSAS deadline and/or any financial aid to be awarded.*

1. **BE REGISTERED at STS PETER & PAUL PARISH for at least SIX MONTHS** (Registration forms may be obtained in the church vestibule or Parish Office).
2. **ATTEND SUNDAY MASS regularly at STS PETER & PAUL PARISH.** *As Catholics it is our obligation to attend Mass every Sunday and Holy Days of Obligation. Parents are encouraged to give this witness of their Catholic faith to their school children. Sunday Mass attendance is the main criteria for status as a Sts Peter & Paul Parishioner.*
3. **CONTRIBUTE to the Offertory of STS PETER & PAUL PARISH on a REGULAR basis.** *One facet of Stewardship is returning our treasure to God. Many Catholics tithe 10% to their parish. All are encouraged to make a sacrificial gift. School families MUST use Parish OFFERTORY ENVELOPES on a weekly basis because this is the most efficient way to provide routinely, updated documentation. However, a more important reason is to combine SCHOOL families with the PARISH families and to celebrate Mass as a whole community.*
4. **PARTICIPATE in the Stewardship Ministries of STS PETER & PAUL PARISH in some way.** *Another facet of Stewardship is returning to God the gift of our time and talent. Our parish offers many opportunities for service and activities for the individual and the family.*

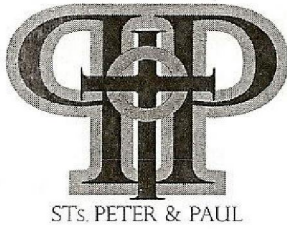
Parent's Signature

Pastor's Signature

Date

Full compliance to these guidelines is periodically reviewed by the Finance Council.

Rev. 2/12



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ACTIVE PARISHIONERS FORM ARCHDIOCESE OF DENVER PARISHES

(Not parishioners at Sts Peter & Paul Parish)

School Year 2012-2013

This form is for families who are actively involved in parishes in the Archdiocese of Denver (other than Sts Peter & Paul) for grades Half-Day Kindergarten thru 8th. CSAF funds are given to our school (not the family) as a sign of the joint commitment to Catholic education as offered through the Archdiocesan School System (Archdiocesan Policy No. 5100).

*In order to qualify, this form **MUST** be signed by your Pastor and returned **BEFORE April 16, 2012 (March 12, 2012, for Early Registration Applicants)** to anticipate the PSAS deadline and/or any financial aid to be awarded. This will help your parish to budget appropriately for the upcoming school year.*

Parish in which you are fully active

City

Parent's/Guardian's Names

Phone

Address

City

St

Zip

<i>Student's Name</i>	1 _____	<i>Grade</i>	_____
	2 _____	<i>Grade</i>	_____
	3 _____	<i>Grade</i>	_____
	4 _____	<i>Grade</i>	_____
	5 _____	<i>Grade</i>	_____

**** to be completed by your pastor ****

This/These student(s) and parents are active parishioners with my parish according to the Archdiocesan guidelines as follows:

- 1) Family has been registered in the parish for six months.*
- 2) Family verifiably contributes on a regular basis for the financial support of the parish.*
- 3) Family attends Mass regularly and is involved in the activities, organizations, or programs at the parish.*

Pastor's Signature

Date

Note: If your parish refuses to sign this form, you will be informed and this amount will be returned to your tuition billing.

REGISTRATION/ROSTER INFORMATION

*Information (of child's primary residence)
as you would like it to appear on *Fast Direct.*

*_____ Please do NOT publish our contact information on *Fast Direct.*

MOTHER

FATHER

Last First

Last First

Street Address

Street Address

City Zip

City Zip

Phone

Phone

Email Address

Email Address

Child(ren) resides with: _____

NAMES OF STUDENTS BEING REGISTERED (K-8TH)

GRADE IN FALL

NAME OF PREK STUDENTS BEING REGISTERED DOB DAYS OF WEEK FULL/ ½ DAYS

My child(ren) will need Sts. Peter & Paul Extended Day Care. _____ Yes _____ No

A separate application needs to be filled out for Day Care.

Ck # Amt Verified

**Fast Direct is our online parent portal.*

Sts. Peter & Paul Catholic School
New Student Form

(To be completed the first year your child attends Sts. Peter & Paul.)

(Please Print)

Grade in Fall

Student's Last Name First Middle

Date Entering

Address

Telephone

City, State, Zip

Mother's Work Phone

Birthplace (City, State)

Birthdate Mo/Day/Yr

Father's Work Phone

Family Parish

Father's Full Name

Religion

Occupation

Mother's Full Name (including MAIDEN)

Religion

Occupation

Guardian's Name (if applicable)

Religion

Occupation

Step-parent's Full Name

Religion

Occupation

Person(s) with whom student lives if not both parents

Number of:

Older Sisters _____ *Younger Sisters* _____ *Older Brothers* _____ *Younger Brothers* _____

Parents are: Separated _____ *Divorced* _____ *Remarried: Mother* _____ *Father* _____

Deceased: Mother _____ *Father* _____

Sacramental Record:

Baptism: (COPY TO OFFICE) Church

City/State

Date

First Communion: Church

City/State

Date

Confirmation: Church

City/State

Date

Name of Last School Attended:

Address of School

Please bring a copy of your child's Baptismal or birth certificate and immunization.