LWe are aware that the above company will be processing our tuition payments for Saint Margaret Mary School. Please complete the application, select the method of payment and sign where indicated. Individual responsible for tuition payments: Address: _____ Apartment Number ___ Home Phone: City: State: Zip Code: Email Address_____ Grade in September Child's Name Grade in September Child's Name 3_____ Please select method of payment: 1. Pay in Full A bill will be sent in April and will be due on May 10th. 2. Coupon Book _____ You will receive a coupon book for your ten tuition payments. The first payment is due May 10th and the final payment is due on February 10th. Payments received after the 10th of the month must include a \$30.00 late fee. 3. Internet Payments You will be responsible for going online each month to make your tuition payment by the 10th of each month beginning in May and ending in February. You will receive a letter in April with instructions for making payment and your payment amount. You will not receive a coupon book. 4. Automatic Debit_____Please attach a void check to this application from the account you would like us to withdraw your payment from monthly. The first withdrawal will be May 10th and your final payment will be February 10th. **Be aware that if you select any 10-month plan you will pay a \$3.00 a month administrative fee. Terms and Conditions: I understand that the tuition payment plan is a 10-payment plan that begins on May 10th and ends February 10th. Payments will not be accepted at the school office. All payments must be made by check or money order to, "Saint Margaret Mary School" and sent to C&E. Payments that are received after the 10th of each month are subject to a \$30.00 late charge. In addition, a \$35.00 bank charge for any check returned for insufficient funds will be due with your next payment. Checks returned for insufficient funds will be automatically re-deposited one time. If I chose the automatic debit plan, I am authorizing C&E Lockbox to withdraw payment from the account I have provided on the 10th of each month beginning in May and ending in February. I understand that any payment returned for insufficient funds will be automatically redeposited 1 time with a \$35.00 bank charge added. Signature: _____ Date: ____ FOR SCHOOL USE ONLY: FAMILY STATUS: CATHOLIC _____NON-CATHOLIC ____ ANNUAL TUITION AMOUNT \$ _____ SCHOLARSHIP/TUITION ASSISTANCE AMOUNT \$ ____ TOTAL FAMILY RESPONSIBILITY \$ MONTHLY TUITION PAYMENT \$_____

To: Tuition Management Division of C&E Lockbox Services

**REMEMBER THAT C&E LOCKBOX WILL BE ADDING A \$3.00 ADMININSTRATIVE FEE TO THE MONTHLY TUITION PAYMENT.