Saint Raphael School 516 High Street Medford MA 02155
Tel: 781-483-3373 Fax: 781-483-3097
Paul Madden, Principal Michele Butler, Assistant Principal

Registration/Tuition Contract Form 2010-2011

Please return by February 5, 2010

_____

Family Name Father's Name Mother's Name

Student Name(s) and Grade(s) for the 2010-2011 school year:

_____ _____

Name Grade (Sept. 10) Name Grade (Sept. 10)

_____ _____

Name Grade (Sept. 10) Name Grade (Sept. 10)

Name and address of contact person responsible for tuition:

_____

Name Phone#

_____

Street/City/Zip e-mail address

Please circle your rate for 2010-2011:

Pre School 3 Year Old	5 Days	3 Days	2 Days		5 Days	3 Days	2 Days
	$5100.00	$3760.00	$2800.00	4 Year Old	$5000.00	$3660.00	$2700.00

K-8 1 Child $3900.00 2 Children $6375.00 3 Children $7700.00

Please circle your choice of payment plan options (Payments start in July):
____One Payment (July) ____Four Payments (July, Sept., Nov., Jan.) ____ Eight Payments (July- Feb.)

I/We understand that:

- a non-refundable registration fee of $250.00 which will be applied toward tuition must accompany this form;
- all payments are due on the first of each month according to the payment option I/we have selected;
- if the tuition schedule presents a hardship, I/we should file for financial aid through Facts Management Company (www.factstuitionaid.com) and/or discuss our situation with the Principal;
- the mandatory fundraiser contribution (calendar drive) per family will be the equivalent of $150.00 ;
- a seat will be reserved for my child(ren) at Saint Raphael School for the 2010-2011 school year;
- Saint Raphael School reserves the right not to re-enroll a student who has not made acceptable academic or social progress.

Parent/Guardian: _____ Date: _____

Office Use Only:
Date Received _____ Reg. Fee _____ Check # _____ other_____

Please return this form with the registration fee to the school office in an envelope marked Registration 2010

A Catholic Environment where each child is loved and valued as a child of God