2024-2025 Cross Lutheran School Tuition Agreement Form

	Member		Non-Member	
	First Child	Each Additional Child	First Child	Each Additional Child
Yearly Tuition Per Child	\$1,950.00	\$ 1,250.00	\$ 2,450.00	\$ 1,550.00
Registration Fee - \$50	\$ 50.00	\$ 50.00	\$ 50.00	\$ 50.00
Remaining Balance	\$ 1,900.00	\$1,200.00	\$ 2,400.00	\$ 1,500.00
Payment Options*				
1 Time Payment	\$ 1,900.00	\$1,200.00	\$ 2,400.00	\$ 1,500.00
2 Semester Payments	\$ 950.00	\$ 600.00	\$ 1,200.00	\$ 750.00
4 Quarterly Payments	\$ 475.00	\$ 300.00	\$ 600.00	\$ 375.00
9 monthly payments	\$ 211.11	\$ 133.33	\$ 266.67	\$ 166.67
12 monthly payments	\$ 158.33	\$ 100.00	\$ 200.00	\$125.00
52 weekly payments	\$ 36.54	\$ 23.08	\$ 46.15	\$ 28.85

*\$100 Discount per family if registered beford May 1, 2024

*Installments are based on remaining tuition after registration fee has been paid. *Discounts are not included in above figures (see below).

Family Name (Parents/Guardians):

Names of children enrolled in DK-8th Grade:_____

Total Tuition Balance: _____ (Do not include reg. fee, discounts, or tuition assistance)

With the help of God, it is the intent of our family to make (select one):

One payment (\$200 discount if paid in full by September 1).

- Two Semester payments of _____, one before the first day of school and
 - one before Feb. 1 (\$100 discount will be applied to 2nd semester if paid on time).
- Four Quarterly payments of , one at the beginning of each school quarter

(\$50 discount will be applied to 4th quarter if paid on time).

- Nine monthly payments of , one before the first day of school.
- Twelve monthly payments of ______.
- 52 Weekly payments of ______.

Do you intend to apply for Tuition Assistance? ____ Yes ____ No

Would you like to enroll in weekly automatic payments? ____ Yes ____ No

If a life-changing event happens where your family is not able to pay the balance that you have accumulated, you will need to set up a meeting with the Principal and Church Executive Committee.

Parent/Guardian Signature: _____ Date: _____

Administrator Signature: _____ Date: _____