



**Immaculate Conception School**  
**109 W. 4th Street—Port Clinton, OH 43452**  
**Tuition Contract 2021-2022**

Family Last Name: \_\_\_\_\_

Student Name: \_\_\_\_\_ Gr. \_\_\_\_\_

Student Name: \_\_\_\_\_ Gr. \_\_\_\_\_

Student Name: \_\_\_\_\_ Gr. \_\_\_\_\_

**PARISHIONER— THREE CHILDREN K-5**

**Tuition Payment of \$150.00 per child due with signed contract: \$450.00**

This payment is Non-Refundable.

For office use only:

Paid: \_\_\_\_\_ Cash \_\_\_\_\_ Check # \_\_\_\_\_ Credit Card

Date: \_\_\_\_\_

**Please check Payment Option:**

\_\_\_\_\_ **\$7775.00** Tuition Paid in Full by August 1, 2021

\_\_\_\_\_ **\$777.50** Tuition Paid Monthly, August 1, 2021 through May 1, 2022 (10 equal installments)

**Tuition Total (K-5):**

**\$7,775.00**

**Billing Information:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

We are interested in Kid's Care: \_\_\_\_\_ Yes \_\_\_\_\_ No

Parent/Guardian Signature

Date

School Representative Signature

Date

**Scholarships Available: (Income and non-income based)**

\_\_\_\_\_ **I am interested in applying for a scholarship.** Please attach W2 Forms. On a separate sheet of paper please write a short paragraph explaining your family's financial situation

*Giving Wisdom to Little Ones Since 1924*