



**School Fees
2018-2019**

Please complete the form below and include your check payable to Ascension School. If you are not paying in full, please complete the ACH debit form (balance to be paid in full by December, 2018). Please do not include any other fees with this check.

These fees cover: iPads, workbooks, classroom and office supplies, special areas, achievement testing, entry fees for academic teams, advertising and some sacramental fees.

Name _____

Address _____

Names of Child/ren	Grade (2018-2019)
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Total # of children _____ x \$250.00 \$ _____

Cafeteria Facility Fee \$ 50.00

PTO Fee \$ 20.00

Graduation Fee (Gr. 8 students only) \$ 50.00

Total \$ _____



SCHOOL FEES FOR 2018-2019

(TO BE COMPLETED ONLY IF YOU ARE NOT PAYING YOUR SCHOOL FEES IN FULL)

**AUTHORIZATION AGREEMENT FOR AUTOMATIC WITHDRAWAL
(ACH DEBITS)
CHURCH OF THE ASCENSION**

___ *I am currently having my tuition payment deducted from my bank account using Automatic withdrawal. The bank account information you have is current. Skip to * and complete remainder of form.*

1. Indicate whether your payment will be withdrawn from your checking or savings account.
2. **Attach a voided check (checking account) or a deposit slip (savings account) for verification of all financial institution information.**
3. Be sure to sign the form!

I (we) hereby authorize church of the Ascension to initiate debit entries and to initiate, if necessary, credit entries and adjustments for any debit entries in error to my (our)

(select one) ___ Checking Account ___ Savings Account

*I (we) would like to initiate debit entries:

Effective Date: August 15, 2018 through December 15, 2018

**Amount to be deducted: _____
(total school fees divided by 5 months)**

I understand that school fee payments will be debited from my account from August to December 2018 or until payment is made in full.

NAME(S) _____
(Please Print)

DATE _____ SIGNED X _____

SIGNED X _____