

VINCENNES CATHOLIC SCHOOLS
APPLICATION FOR ADMISSION

2021

2022

Please Print:

Parent Name _____ Ph# _____ e-mail _____

Street / City / State / Zip _____

Student(s) Name / Grade 1. _____ / _____ 2. _____ / _____

3. _____ / _____ 4. _____ / _____

PLEASE CHECK WHICH LEVEL OF ADMISSION PRIORITY PERTAINS TO YOU: (will be verified w/Parish Office)

- Student currently enrolled at Flaget / Rivet and would like to re-enroll
- Registered, active parishioner* whose siblings currently attend Vincennes Catholic Schools
- Registered, active parishioner*
- Catholic, non-parishioner whose siblings currently attend Vincennes Catholic Schools
- Non-parishioners whose siblings currently attend Vincennes Catholic Schools
- Catholic non-parishioners
- Non-parishioners

*A registered, active Parishioner is one registered with parish office records, comes to pray with parish community regularly, participates in life of parish using time/talents to further work of church, supports parish financially.

I. Book/Technology Fee \$255.00 per child (non-refundable).....Total \$ _____

II. Tuition Fee (K-12) - see schedule below.....Total \$ _____

Child	Parish Rate	Non-Parish Rate
1	\$3,750.00	\$5,100.00
2	\$6,514.00	\$8,966.00
3	\$9,032.00	\$12,524.00
4	\$11,056.00	\$15,464.00
Each Additional	\$2,764.00	\$3,866.00

III. Transportation Fee \$415.00 per family - NOT covered by voucher.....Total \$ _____

Payment required by semester in order to ride the bus.

Total Due (Add totals from above).....Grand Total \$ _____

Less payment enclosed.....\$ _____

BALANCE DUE.....\$ _____

Divide balance due by 12 to determine monthly deduction.....\$ _____

Note: Balance must be paid by electronic payment or paid in full at the time of registration. Electronic payment is based on twelve (12) equal payments deducted from your bank account beginning July 26, 2021 for the 2021-2022 school year. Please complete the Authorization Agreement for pre-authorized payments below. Failure to meet financial obligation may result in withdrawal of the child and legal process for collection. If you have any questions, please call 812-882-6215. I agree that I am legally responsible for fees herein.

Signature _____ S.S. # _____ - _____ - _____ Date _____

AUTHORIZATION AGREEMENT FOR PRE-AUTHORIZED PAYMENTS

I hereby authorize the Vincennes Catholic Schools to initiate debit entries to my (our) CHECKING or SAVINGS (select one) indicated below and depository named below to debit same to such account. Please attach voided check.

DEPOSITORY NAME (your bank) _____

TRANSIT # _____ ACCOUNT # _____

SIGNATURE _____ S.S.# _____ - _____ - _____ DATE _____

Return to Vincennes Catholic Schools, 210 Barnett St., Vincennes, IN 47591

A completed copy of this form must accompany all CEF grant applications

