

**VINCENNES CATHOLIC SCHOOLS
APPLICATION FOR ADMISSION**

2023

2024

Please Print:

Parent Name _____ Ph# _____ e-mail _____

Street / City / State / Zip _____

Student Name 1. _____ Grade _____ Birthdate _____

Student Name 2. _____ Grade _____ Birthdate _____

Student Name 3. _____ Grade _____ Birthdate _____

Student Name 4. _____ Grade _____ Birthdate _____

Student Name 5. _____ Grade _____ Birthdate _____

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)..... \$ _____

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

<u>Child</u>	<u>Parish Rate</u>	<u>Non-Parish Rate</u>
1	\$3,850.00	\$5,300.00
2	\$7,700.00	\$10,600.00
3	\$11,550.00	\$15,900.00
4	\$15,400.00	\$21,200.00
5	\$19,250.00	\$26,500.00

III. Transportation Fee (optional) \$415.00 per family - **NOT covered by voucher**.... \$ _____

Payment required by semester in order to ride the bus.

Total Due (Total Book/Technology Fee, Tuition Fee, Transportation Fee) 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 25, 2023 for the 2023-2024 school year. **Please complete the Authorization Agreement for pre-authorized payments below. Failure to meet financial obligation may result in withdrawal of the student.**

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) bank account indicated below and depository named below to debit same to such account. **Please attach voided check.**

TYPE OF ACCOUNT (CIRCLE ONE) **CHECKING** **SAVINGS** **SAME AS LAST YEAR**

DEPOSITORY NAME (your bank) _____

TRANSIT # _____ ACCOUNT # _____

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

**Return to: Flaget Elementary School, 800 Vigo St., Vincennes, IN 47591
Or to: Rivet Middle/High School, 210 Barnett St., Vincennes, IN 47591**