



PROVIDENCE CHRISTIAN SCHOOL - 06325

FAMILY INFORMATION

FIRST NAME OF PARENT/GUARDIAN/BILL PAYER _____ LAST NAME OF PARENT/GUARDIAN/BILL PAYER _____ 20 20

FIRST NAME OF ADDITIONAL AUTHORIZED PARTY _____ LAST NAME OF ADDITIONAL AUTHORIZED PARTY _____

STREET ADDRESS OR PO BOX _____ APT _____ CITY _____ STATE _____ ZIP CODE _____
MOBILE TELEPHONE NUMBER _____ MOBILE TELEPHONE NUMBER _____ **CA**

E-MAIL ADDRESS _____

PLEASE DO NOT SEND FORM IF FAMILY IS NOT RETURNING

PAYMENT METHOD

PAYMENT PLAN

DUE DATE**

PAYMENT METHOD**

**For changes, parents must complete a new form to attach to this form

CURRENT PLAN
A 10 Payments Sep-Jun

AVAILABLE PLANS
A-10 Payments Sep-Jun

STUDENT INFORMATION - PLEASE CHECK "REMOVE" IF STUDENT IS NOT RETURNING

REMOVE? <input type="checkbox"/>	GRADE _____	GRADE CHANGE? _____	FIRST NAME _____	LAST NAME _____	*STUDENT ID _____	STUDENT TUITION _____
<input type="checkbox"/>						\$ _____
<input type="checkbox"/>						\$ _____
<input type="checkbox"/>						\$ _____
<input type="checkbox"/>						\$ _____
<input type="checkbox"/>						\$ _____

PLEASE ADD ADDITIONAL NEW STUDENT INFORMATION BELOW

GRADE _____	FIRST NAME OF STUDENT _____	LAST NAME OF STUDENT _____	STUDENT TUITION _____
			\$ _____
			\$ _____

OPTIONAL SCHOOL FIELDS

CURRENT SCHOOL FAMILY ID: _____

NEW SCHOOL FAMILY ID: _____

CURRENT TYPE CODE: _____

NEW TYPE CODE: _____

AMOUNT FOR SMART TO COLLECT _____

FAMILY TUITION SUBTOTAL \$ _____

FEES & DISCOUNTS

If specified fees and discounts should be applied in addition to the tuition amounts included above, please contact your account manager.

LATE ENROLLMENT

THIS FAMILY IS ENROLLING LATE:

SPREAD BALANCE ACROSS REMAINING MONTHS OF PLAN

COLLECT BALANCE IN FIRST MONTH

ANNUAL TOTAL DUE \$ _____