



**Lutheran High School – Tuition & Fees Payment Agreement Form**  
**NEW STUDENT ONLY**  
**\$10,780 for 2017-18**

Lutheran High School desires for all families to use an automatic payment method for fees and tuition payments for the 2017-2018 school year. Please select the desired payment plan for tuition payment(s) and provide the necessary payment information. Please sign and return this form to the Association office at Lutheran High School. **You will not be considered enrolled until this form has been received.**

**PAYMENT DEDUCTION DATES**

Please initial to acknowledge the following **AUTOMATIC** deductions:

- \_\_\_ Enrollment Fee of \$150      **AUTOMATICALLY DEDUCTED** on March 24, 2017
- \_\_\_ Materials Fee of \$600      **AUTOMATICALLY DEDUCTED** on June 1, 2017

Please select one of the following payment plan options:

- Tuition/fees paid in full      **AUTOMATICALLY DEDUCTED** on the May 12, 2017 - \$10,800  
This will included the Materials fee of \$600 and Annual tuition of \$10,200 (discounted \$580 for paying in full on May 12, 2017)
- Monthly tuition payments      **AUTOMATICALLY DEDUCTED** on the first day of the month (11 monthly payments from July 1, 2017 to May 1, 2018 of \$980 per month **OR** a discounted amount after tuition assistance has been processed.)
- Semi-Annual tuition payments      **AUTOMATICALLY DEDUCTED** on July 1, 2017 and January 1, 2018
- Annual tuition payment      **AUTOMATICALLY DEDUCTED** on July 1, 2017

**PAYMENT INFORMATION**

Please select one of the following options:

- ACH (automatic checking account deduction):** \_\_\_\_\_  

Bank Name

9 digit Routing Number
Account Number
- Credit Card Information (If using Debit Card, please use ACH)**  

Name on Card
Card number

Expiration date
CVC number

*I authorize Lutheran High School to debit or charge my payments via ACH or credit card as outlined above. I further agree that Lutheran High School may process these payments as though I personally signed or initiated the debit or charge.*

|                       |       |            |      |
|-----------------------|-------|------------|------|
| Name                  |       | Student(s) |      |
| Address               |       |            |      |
| City                  | State | Zip        |      |
| Email                 |       |            |      |
| Authorizing Signature |       |            | Date |