



# Holy Savior Academy

149 South Plainfield Avenue, South Plainfield, NJ 07080

908-822-5890 908-822-5891 Fax

## KINDERGARTEN – GRADE 8

### CONTRACT 2025 – 2026

### PLEASE COMPLETE BOTH SIDES

**Please Select:**

		<u>Baptized Catholic</u>	<u>Other</u>
_____	1 Child	\$ 5,900/year	\$ 7,150/year
_____	2 Children	\$10,325/year	\$12,525/year
_____	3 Children	\$13,225/year	\$16,100/year
_____	4 Children	\$16,125/year	\$19,675/year

**Registration/Re-Registration Fee per Family**

*Non - refundable and must accompany Application*

_____	<b>Before Feb. 13, 2025</b>	<b>\$100.00 per family</b>
_____	After Feb. 13, 2025	\$250.00 per family

**Academic Fee (Books, supplies, computer fee, etc.)**

*Non – refundable after August 1*

_____	<b>Before June 1, 2025</b>	<b>\$400.00 per student</b>
_____	After June 1, 2025*	\$450.00 per student

\* Paid directly to HSA or billed thru FACTS

**Facilities Fee** – Billed thru FACTS if not received by August 1      \$550.00 per family

-OVER-

KINDERGARTEN - GRADE 8 CONTRACT 2025-26

**Payment Options: Select one**

\_\_\_\_\_ Option 1. ONE FULL PAYMENT, made directly to HOLY SAVIOR ACADEMY. **Due by August 1, 2025. A \$100.00 discount (per family) will be made if paid in one lump sum.**

\_\_\_\_\_ Option 2. TEN MONTHLY PAYMENTS, **August 2025 through May 2026**, through the FACTS Tuition Payment Plan. This option requires parent/guardian to sign up online a separate Automatic Tuition Payment Agreement with FACTS Management Company that will become part of this School Contract. Under this Agreement, I/We will authorize my/our financial institution to make scheduled payments to FACTS. The FACTS enrollment fee is \$50.00 per year.

If I/we fail to pay tuition/fees by the due date for any reason, an additional \$30.00 late fee will be assessed. The payment plus the \$30.00 late fee is to be paid within seven (7) days of the original date. I/we further agree that if the bank refuses to honor my/our check, I/we will pay Holy Savior Academy an additional \$30.00 returned check fee in addition to any tuition/fees and late fee due. Holy Savior Academy has the right to refuse my/our check and demand payment in cash, money order or cashier check.

If Option 2 is selected, payments will be made through FACTS.

If any provision of this contract (and the Automatic Tuition Payment Agreement with FACTS Management Company if payment Option 2 is selected) is not satisfied, Holy Savior Academy has the right to demand full and immediate payment of all outstanding tuition and/or fees owed. x \_\_\_\_\_ (Initial)

Failure to make full and immediate payment will indicate to Holy Savior Academy that I/we intend to withdraw my/our child(ren) from Holy Savior Academy. x \_\_\_\_\_ (Initial)

I have read the above and I certify that I understand everything herein contained. I further certify that the information given in the "Registration Form" is true, accurate and complete.

I understand that my financial obligations are to remain current. School records and extracurricular activities will be withheld until all financial obligations are met.

Parent or Guardian Name: \_\_\_\_\_  
PRINT

Parent or Guardian Signature: \_\_\_\_\_ Email address \_\_\_\_\_

Address: \_\_\_\_\_  
Street City Zip

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Full Name of Child: \_\_\_\_\_ Grade \_\_\_\_\_  
PRINT

Full Name of Child: \_\_\_\_\_ Grade \_\_\_\_\_  
PRINT

Full Name of Child \_\_\_\_\_ Grade \_\_\_\_\_  
PRINT

Relationship to Child: \_\_\_\_\_ Date: \_\_\_\_\_

