

St. Stephen School

To Love, To Inspire – To Achieve!

Discipleship Embodied • Partnership Embraced • Scholarship Celebrated • Leadership Modeled • Citizenship Personified

2026-2027 PRE-K4 Tuition Agreement

(Please clearly CHECK (X) your Tuition Payment option)

-Registration Fee Pre-K4: \$200.00/child by Feb.15th \$225.00/child after Feb.15th 2026

An active parishioner in good standing is a family or individual that is formally registered, worships, supports the parish financially & participates in the life of the parish community through involvement in church programs, activities, and/or church ministries here at St. Stephen's parish.

SS ACTIVE PARISHIONER Pre-K4 Tuition \$7,500.00*/Child (Approx.\$187/wk)

_____ Annual (\$7,350.00) _____ 10 payments(\$750.00) _____ 12 payments (\$625.00)
(Includes 2% Discount) (Paid through FACTS) (Paid through FACTS)

Inactive Registered OR Non-Parishioner Pre-K4 Tuition \$8,500.00*/Child (Approx.\$212/wk)

_____ Annual (\$8,330.00) _____ 10 payments (\$850.00) _____ 12 payments (\$708.35)
(Includes 2% Discount) (Paid though FACTS) (Paid through FACTS)

Any early student withdrawal requires 30-day notice

IMPORTANT STUDENT REQUIREMENTS

All Students must be 4 by December 1, 2026 & Potty Trained by September 1, 2026

Payment Options: (Please check below) \$25 Late Payment & Returned Fee

_____ Annually: One payment due by August 15, 2026 to receive 2% discount.
_____ 10 payments FACTS - August 2026 – May 2027 (Must sign up on-line)
_____ 12 payments FACTS - July 2026 – June 2027 **Option Available until 6/30/2026**
_____ Please continue my current enrollment in FACTS all information is the same.

When paying through Facts, you may also choose a credit card option for Annual or Monthly!
Important: If paying monthly, a FACTS on-line sign up is required at time of registration.

It is truly essential that each and every family volunteer for at least one Fish Fry, contribute a Gift Basket to the Gala a value of \$50, and support the Fundraising efforts of the Home School Association. Funds raised benefit every child and every family and without these funds, tuition would need to be much greater.

Please COMPLETE front & back of this form, sign and keep one copy for your records!

I agree to abide by the terms of the Tuition Payment Options selected above and acknowledge that this is a legally binding contract. I understand that tuition covers only part of the educational cost, which is more than **\$8,500.00** per student, and that the rest of the cost is covered by fundraising events. St. Stephen School will make every attempt to provide in school instruction and have implemented the necessary provisions to pivot to a remote instruction if required by local or state health requirements. I understand that my tuition obligation is for in-school and/or remote learning. I further understand that in accordance with the Tuition Policy of St. Stephen School, if tuition is overdue student exam grades will not be recorded and report card and transcripts will be withheld, and that this may result in a request to remove my child(ren) from St. Stephen School. I/we agree to reimburse St. Stephen's the fees of any collection efforts including agency and attorney fees we incur in such collection efforts.

Parent/Guardian Name(s) (print): _____ / _____

Parent/Guardian Signature(s): _____ / _____

How did you learn about or who recommended SSS? _____

2080 Baseline Road • Grand Island, NY 14072
Phone: 716-773-4347 • www.ststephensgi.org

Accredited by the Middle States Association of Colleges and Schools

ST. STEPHEN'S SCHOOL
2026 – 2027 STUDENT REGISTRATION INFORMATION

Please clearly print all information on this page

<u>STUDENT INFORMATION</u>	26-27	Male/	Date of	New	Baptized
Last Name, First Name	Grade	Female	Birth	Student	
1. _____	_____	M F	__/__/__	Y N	Y N
2. _____	_____	M F	__/__/__	Y N	Y N
3. _____	_____	M F	__/__/__	Y N	Y N
4. _____	_____	M F	__/__/__	Y N	Y N
5. _____	_____	M F	__/__/__	Y N	Y N

FAMILY & FAITH INFORMATION:

Family Name: _____

Street Address: _____

City/Zip: _____, NY ZIP _____ Home Phone: _____

Family E-Mail: _____

____ Catholic ____ Non-Catholic Current Parish Affiliation: _____

Please list parish(es) of Baptism(for future sacramental purposes): _____

	Father	Mother
Parent First Name:	_____	_____
Phone (Home)	_____	_____
Phone (Work)	_____	_____
Phone (Cellular)	_____	_____
E-Mail Address:	_____	_____

ALTERNATE BILLING INFORMATION: Complete only if different than Family Section
 (Important: If paying monthly, a FACTS on-line sign up is required at time of registration.)

Name: _____

Street Address: _____

City/State: _____ ZIP _____

Phone (home) _____ (work) _____

Relationship to student(s): _____

REGISTRATION FEE – Payment made at time of registration is non-refundable.

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 OFFICE USE ONLY

ID# _____	Annual Tuition Rate:\$ _____	10 Month Tuition Rate: \$ _____	12 Month Tuition Rate: \$ _____
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Registration Fee Paid \$ _____ Date: __/__/__ Cash/Check# _____ Initials: _____

Tuition Paid: \$ _____ Date: __/__/__ Cash/Check# _____ Initials: _____

Current FACTS Re-Enrollment Confirmed: Yes No New FACTS Received Yes No