



## 2010-2011 Tuition and Fees

Santa Rosa Christian School 50 Mark West Springs Road • Santa Rosa, CA 95403 • Phone (707) 542-6414 • Fax (707) 542-0421

**New Student Application Fee \$50    Family Registration Fee \$125**  
**New Student International Application Fee \$225    International Registration Fee \$350**

Grade	Annual	Quarterly	Monthly (Auto – 10 Months)
Kindergarten	\$4,875	\$1,218.75	\$487.50
1 <sup>st</sup> – 5 <sup>th</sup>	\$5,650	\$1,412.50	\$565.00
6 <sup>th</sup> – 8 <sup>th</sup>	\$5,975	\$1,493.75	\$597.50
9 <sup>th</sup> – 12 <sup>th</sup>	\$7,600	\$1,900.00	\$760.00
International	TBD / Annual Payment Only		

**Curriculum Fees: Due August 15, 2010 (Families may choose to roll fees into tuition payments)**

Kindergarten: \$150  
1<sup>st</sup> – 3<sup>rd</sup> Grade: \$285  
4<sup>th</sup> & 5<sup>th</sup> Grade: \$385  
6<sup>th</sup> – 8<sup>th</sup> Grade: \$340  
9<sup>th</sup> – 12<sup>th</sup> Grade: \$810

Curriculum fees cover instructional materials, books, supplies, resources, subsidizes field trips (other costs may apply) and other grade level expenses.

**Additional Fees:**

\$TBD Camp Fee (9-12<sup>th</sup>)  
\$TBD Camp Fee (6-8<sup>th</sup>)  
\$50 Optional Yearbook Fee  
\$150 High School Athletic Fee per Sport  
\$100 Middle School Athletic Fee per Sport  
\$75 Elementary Athletic Fee per Sport

**Other Fees (i.e. unsubsidized field trips, enrichment classes and daycare) are TBD**

Quarterly Payments are due: July 1, October 1, January 1, and April 1

Monthly Automatic Payments are processed between the 1<sup>st</sup> and 10<sup>th</sup> of each month. July thru April  
(Please note that there is a 3% Convenience Fee for Credit Card Use)

## Electronic Fund Transfer Agreement

I authorize Santa Rosa Christian School to use the information provided below to make electronic fund transfers from my bank account to pay fees due to the school. (This person must be an authorized signer on the account listed below.)

Signature \_\_\_\_\_ Date \_\_\_\_\_

First Name

Middle Initial

Last Name

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Address

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City

State

Zip Code

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Daytime Phone

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Ext.

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Evening Phone

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### Bank Account To Be Used for the Electronic Fund Transfer Please Specify Account Type

Checking Account – Please attach a voided check.

Savings Account – No deposit slips please. Provide the savings account number.

Bank Name

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Bank Phone Number

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Routing Number

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Account Number

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### Terms of Payment

Please Check:

Quarterly Payments July 1, October 1, January 1, and April 1

Monthly Payments July thru April on the \_\_\_\_\_ of each month or next business day (must be between 1<sup>st</sup> and 10<sup>th</sup>)

Total Tuition Due: \_\_\_\_\_ Date of First Payment: \_\_\_\_\_ Number of Payments \_\_\_\_\_

