



## GRASSROOTS FREE SCHOOL 2021 - 2022 *Fee Schedule*

OUR REGULAR SCHOOL YEAR TUITION (one student)	\$ <u>5000.00</u>
FIELD TRIP FEE	\$ <u>100.00</u>
PARENT PARTICIPATION FEE (20 hours x ___ parent ) x \$15	\$ _____
BEFORE CARE (\$550) / AFTER CARE (\$650) <i>apply 1/2 off discount</i>	\$ _____
TOTAL DUE FOR SCHOOL YEAR	\$ _____
 INITIAL ENROLLMENT/RE-ENROLLMENT PAYMENT CALCULATION: (Please see details about fees in Family Information Packet and/or consult staff)	
<b>MONTHLY INSTALLMENT</b> <i>divide "total due for school year" by 10</i>	\$ _____
INSURANCE FEE (\$15) <i>Annual fee</i>	\$ _____
REGISTRATION (\$75) <i>Annual fee</i>	\$ _____
TESTING (\$29) <i>if applicable</i>	\$ _____
FINGERPRINT RETENTION (\$6) <i>if applicable</i>	\$ _____
ENROLLMENT PAYMENT <i>if applicable</i>	\$ _____
PREVIOUS BALANCE DUE <i>if applicable</i>	\$ _____
TOTAL DUE	\$ _____

PERSON RESPONSIBLE for tuition/fees should initial every item and sign below:

\_\_\_\_\_ I agree that I will pay my calculated tuition, and any fees specified above and in the Fees Information sheet, until I notify the school IN WRITING that there are (a) any changes, and/or (b) my children are withdrawn.

\_\_\_\_\_ I agree to pay all collection costs for unpaid debts owed by me to Grassroots Free School.

\_\_\_\_\_  
Parent/Guardian signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
For Grassroots Free School

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian printed name