**FFE PAYMENT FORM 2019 -2020**

FAMILY NAME_____

ADDRESS_____

TELEPHONE #_____ ENVELOPE #_____

| | | |
|---|---|---|
| **Basic Fee for children in Grades 1 - 7:** | 1 child | $150 |
| | Each add'l child | $ 25 |
| **Additional Fee for First Eucharist** | | **$ 50 (per student)** |
| **Fee for Confirmation – no other fee required** | | **$ 100 (per student)** |

Amount Paid : ☐ Cash _____ Receipt given ☐

☐ Check #_____

☐ Credit Card

To pay by Credit Card, please complete the following information:

Name on Credit Card_____

Card Type ☐ Visa ☐ Mastercard ☐ Discover

Card #_____ Verification #_____

Exp. Date_____

Billing Address_____

Signature_____

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